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Overview of the Annual Performance Report Development:

Federal Fiscal Year 2008 is the same timeframe as State Fiscal Year 2009. This reporting period is for the time period of July 1, 2008 through June 30, 2009.

Information to support the development of this Annual Performance Report (APR) has been compiled from the various components of the general supervision system. This includes all phases of the Part C monitoring process, the Tracking Resources and Children (TRAC) child data collection system, collection and analysis of 618 data, and tracking of complaints. Data reflected in this APR are based on the timeframe when the service data was generated. The IDEA Part C General Supervision process has been modified to ensure that in future APRs all programs will have findings issued in the same fiscal year as the Data are generated. Details of these changes are included in Indicator nine (9).

Throughout the course of FFY08, Nevada has presented data and other information relative to the State Performance Plan (SPP) and related activities to early intervention programs in all regions. Information regarding performance has also been reported to Nevada's Interagency Coordinating Council (ICC) including ICC Committees, as appropriate. The Part C Lead Agency meets with all early intervention program managers and supervisors on a quarterly basis and relevant data regarding the status of performance relative to the SPP indicators is discussed at each meeting. The IDEA Part C Office personnel meet on a monthly basis to review critical issues and status of performance for each indicator.

Components of the SPP are included on the ICC agenda at each quarterly meeting. Each indicator of the APR was reviewed with the ICC prior to submission for input. A form for written feedback was also provided at that time. In addition, the APR was submitted to all early intervention program managers and supervisors for review and comment prior to submission. Subcommittees were formed to work on child outcomes and child find indicators of the SPP and to strategize around implementation of the activities and for data collection. Part C personnel participated in all of the technical assistance calls provided by OSEP related to APR development and submission. Nevada Part C also received technical assistance from Nevada's OSEP Project Officer. The State contacts with the National Early Childhood Technical Assistance Center (NECTAC) and the Western Regional Resource Center (WWRC) provided extensive technical support to the State in finalizing the APR. The IDEA Part C Office would like to express appreciation to everyone for their input and support for the ongoing development of this APR.

As noted throughout this report, the State of Nevada, like many other states, has continued to experience severe economic decline in FFY08. Nevada's financial health is heavily dependent on tourism and when the national economy suffers, Nevada's revenue is severely impacted. The State's early intervention programs, like many others in the state, have been impacted through hiring freezes and the stresses of potential budget cuts. The need for support for early intervention services was recognized by both the Governor and the Legislature during the State 2009 legislative session and new funds were allocated. However, as the State's economic situation declines, there is potential for budget cuts that will reduce the amount of the allocation over the course of the 2010-11 biennium.

The APR will be posted on the Nevada Early Intervention website by May 1, 2010. Local report cards will be created for each region and will also be posted to the website by May 1, 2010. The website can be located at the State of Nevada website under: http://health.nv.gov/BEIS.htm. All reports are under the Publications tab. A news release will be created to report to the media on the release of the APR in June 2010 through the Department's Public Information Officer.

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After decades at or near the top for national population growth, Nevada has tumbled to eighth on the list of fastest-growing states. Nevada has been among the four fastest-growing states each of the last 23 years, but gained fewer than 46,000 new residents from July 1, 2007 through June 30, 2008, an increase of 1.8%, according to the Census Bureau population estimates released on December 22, 2008. The Census Bureau's estimates are reached by measuring births, deaths and migration into and out of each of the 50 states, the District of Columbia and Puerto Rico. Arizona was the fastest-growing state from July 2005 to July 2006, before that, Nevada topped the rankings 19 years in a row. Nevada has grown between 1990 and 2000 by 66.27% according to Census Scope. The following chart illustrates the growth in Nevada population since the 1960s.

Population, 1960-2000

	1960	1970	1980	1990	2000
Total	285,278	488,738	800,493	1,201,833	1,998,257
Change		203,460	311,755	401,340	796,424
Percent Change		71.32%	63.79%	50.14%	66.27%

Last year Nevada sat atop the Census Bureau's rankings with a growth rate of 2.9% from July 2006 to July 2007. Those estimates have since been revised to show Utah in first place, Arizona in second and Nevada in third. Persons per square mile in Nevada is 18.2, while the average in the USA is 79.6 and 26.9% of the population speaks a language other than English at home, compared to the USA of 19.7%. Nevada's Strategic Plan for Persons with Disabilities (2002) indicates the disability population in the State increased by 157% between 1990 and 2000, while that of the nation decreased by 2%. US Census 2000 data indicates almost 12% of the State's population has a disability. Rankings from the Annie E. Casey Foundation indicate 8.1% of all live births in Nevada in 2003 had low birth weight. Kids Count Data indicates in 2004, one in eight babies in the United States was born preterm, or before the 37th week of pregnancy. This represents more than half a million infants—the highest number ever recorded. Nevada ranked 41 when compared with other states with a percentage of 13.5% or 4,716 children. In addition, Nevada continues to be challenged with a highly mobile population, and families may come and go from the early intervention system a number of times over the three year age span of services. In FFY07 Nevada Early Intervention Services had over 570 children/families leave and return to early intervention within that year, which is indicative of the highly transient nature of Nevada's population. Per the Nevada Department of Education, Nevada has a 30% transience rate within school districts. These statistics represent some of the realities and challenges faced by Nevada's Part C service system as the State moves forward in serving infants and toddlers with disabilities and their families.

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Overview of the Annual Performance Report Development:

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Monitoring Priority: Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delay.

FFY	Measurable and Rigorous Target
FFY08	100%

Actual Target Data for FFY08

Statewide: The percentage data for this indicator is taken from program monitoring conducted in FFY08. Statewide data for this reporting period is based on monitoring of one early intervention program. During this monitoring:

- 20 children received all early intervention services on their IFSPs in a timely manner
- 35 children had an IFSP
- Percent = (20/35)*100 = 57%

The range of delay was from 8 to 175 days. The service most frequently delayed was Special Instruction. IFSP junctures where services were most often delayed was the Initial IFSP and the 6 month review. The primary reason for delays that were not attributable to family circumstances was shortage in personnel. The monitoring of this program represented on-going noncompliance and is not a new finding.

Identification of Findings of Noncompliance in FFY08

Data from monitoring of three programs (not including the program reflected in the Actual Target Data section above) was reported in the FFY07 APR based on the timeframe of the data reviewed. However, findings were not issued until FFY08 (November 2008). Of the three (3) programs included in this section, one (1) was found to be in on-going noncompliance status. The two remaining programs were issued a new finding of noncompliance. This represents two (2) new findings of noncompliance issued as a result of this monitoring. Correction of these findings of noncompliance will be reported in the FFY09 APR, due February 1, 2011.

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Twelve (12) findings of noncompliance were issued in FFY08 from complaint investigations relative to timely initiation of IFSP services. Eleven (11) were individual child complaints and one (1) was an administrative complaint alleging a system failure. One additional child complaint was filed but the issue was resolved between the parents and the early intervention program prior to completion of the investigation; therefore, no finding was issued. Correction of these findings of noncompliance will be reported in the FFY09 APR, due February 1, 2011.

Correction of Noncompliance Related to Indicator 1:

Table 1.A: Identification and Correction of Noncompliance

FFY	Number of Findings of Noncompliance Related to Indicator 1	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2005	1	0	0	1
FFY 2006	2	1	0	1
* FFY 2007	6	5	1	0
FFY 2008	14	To be re	ported in the FFY09	APR

^{*} New findings reported for FFY07 were primarily from individual child complaints. Only one early intervention program had a finding based on monitoring activities conducted in 2007. Three additional programs were monitored in FFY07 but resulting findings were issued in FFY08. The indication of correction is relative to individual child complaints. The individual early intervention programs remain under correction for systemic noncompliance in this indicator.

In FFY07, there was one (1) new finding based on program monitoring and five (5) new findings of noncompliance based on investigation of individual child complaints. All five (5) findings based on individual child complaints were corrected in a timely manner. The one (1) finding identified through program monitoring was not corrected in a timely manner but there was subsequent verification of correction for the individual children, (each child received IFSP services although late). Since the program withdrew as an early intervention service provider, it was not possible to review updated data to determine that the requirement was being implemented for all children. As a result, this finding was closed.

In order for Nevada to verify a program has corrected the noncompliance: 1) The program must provide documentation (verified by random file checks by state staff) that all children (who remained within jurisdiction of the program) received services, although late; and (2) Program managers must review child data quarterly to determine whether data demonstrates the program is currently meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, a minimum of one quarter of data must demonstrate 100% of services were provided timely.

In FFY08, two (2) programs continued to have on-going noncompliance from FFY05 and FFY06. The Part C Office implemented the following activities to ensure correction of noncompliance in this indicator.

Required Correction for Previously Identified Noncompliance:

In FFY06, two (2) programs were notified of noncompliance for timely initiation of IFSP services through program monitoring. One program (1) corrected in a timely manner. One (1) program did not. At that time, the Part C Office conducted more intensive investigation to identify the underlying causes of the noncompliance. The two primary causes for the noncompliance was increased referrals accompanied by insufficient funding and personnel resources. The IDEA Part C Office took the following actions:

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Systemically:

- Assisted the State Health Division, Bureau of Early Intervention Services (BEIS) in compiling data to support budget preparation and demonstrate the urgent need for additional resources;
- Collaborated with the State Health Division in creating a checklist for ensuring potential new service provider agencies are able to meet all requirements for providing early intervention services:
- Provide updated status reports to the ICC and other interested parties on a regular basis; and
- Explored potential systemic level changes that could support the State in coming into compliance in this indicator including consideration of instituting a sliding fee scale

Program Level:

- Continuing to host quarterly statewide management team meetings which all programs are required to participate;
- Increased the frequency of tracking delay in service initiation by program from quarterly to monthly through the TRAC data system;
- Tracking assignment of children to service provider agencies;
- Continuing to monitor progress on the implementation of program Corrective Action Plan (CAP) activities developed as a result of program monitoring; and
- Assisted in development of written policies and procedures to be implemented by all early intervention programs relative to implementing correction and remedy for all children whose services have not been initiated in a timely manner.

Required Follow-up for Continuing Noncompliance:

In FFY06, one program did not correct a finding in a timely manner for this indicator identified in FFY05. The finding issued in FFY05 was made based on monitoring activity which occurred at the end of FFY04. This finding has not been corrected as of this reporting period. Actions instituted by program management to ensure the program subsequently achieved compliance included:

- Participated in Efficiencies Workgroup process:
- Creation of a centralized process for tracking all children and services with one individual assigned to oversee assignment of children to service providers;
- Implemented a policy of assigning children to individual services as openings came available with program supervisors acting as interim service coordinator verses waiting for assignment of permanent service coordinator;
- Increased hours of therapy providers contracted through the State temporary employment system through increased Medicaid revenue:
- Established process to ensure maximum employee productivity by establishing a matrix to monitor employee caseload;
- Collaborate with the Part C Data Manager to develop Crystal Reports to assist with internal tracking of child assignments;
- Monthly monitoring of children not assigned to service providers through Crystal Report process;
- Review service coordination processes to increase access to community providers, especially for those children whose families utilized third party payor sources;
- Increased access to services utilizing community providers through parent reimbursement; and
- Participated in weekly management meetings to monitor personnel and resources status;

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for FFY08:</u>

The State has not achieved timely correction of the systemic noncompliance for this indicator. There has, however, been some improvement in the percent of compliance based on review of child records through the monitoring process. The percent of compliance reported for FFY07 was 51.14% compared to 57% for FFY08. It has been evident that the inability to achieve statewide compliance in this indicator has been the direct result of shortage of personnel due to the State's budget crisis.

The State Legislature, in the SFY2009 session, appropriated \$5,170,785 of new state general fund dollars for early intervention services for the next biennium (FFY09-10). With the addition of the American

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Recovery and Reinvestment Act (ARRA) funds, \$9,071,785 in new funding was allocated for early intervention services. The Legislature earmarked all new funds for expanding the provision of early intervention services through the utilization of service providers in the community rather than further investment in, or expansion of, the existing state-operated programs. A specific roll-out schedule was established by the Legislature for these funds beginning July 1, 2009.

The roll-out of funds began July 2009. Since that time, four new community provider agencies have entered into a provider agreement with the State Health Division to establish and maintain a comprehensive early intervention program. Three of the programs are located in the Southern region and one is in the Northwest region. Each program is committed, by terms of the agreement, to enroll at least one hundred children by the end of their first six (6) months of operation. One private, for profit, early intervention program established under a similar agreement with the State in 2007, withdrew as a service provider effective August 2009. The impact of this additional funding will be reported in the FFY09 APR.

It is also noted however, all state employees, including early intervention service providers employed by the state, were required to take one (1) mandatory furlough day each month effective July 1, 2009. This, in effect, resulted in reduction of the availability of the workforce for early intervention services. In addition, the state is almost certainly facing additional budget cuts in 2010 and there is concern regarding the potential cuts to the funds allocated. Specifically, in the case of the program with on-going noncompliance in this indicator from 2005, this effectively reduced the personnel caseload capacity for service delivery from 1,800 children per month to 1,717 children per month.

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that are eliminated will be removed from the revised State Performance Plan for 2009. Clarification is provided for the determination for each activity.

Critical Activities This Reporting Period:

Activity 14: Develop budget requests for future legislative sessions documenting the need for additional personnel if data indicates regions cannot maintain timely service delivery. **This activity is ongoing.**

• A request for allocation of additional funds to support early intervention services was included in the Governor's proposed budget for the current biennium. The Legislature approved this portion of the proposed budget and allocated approximately \$9 million in new funds for early intervention services over the biennium. All new funds were designated for expanding early intervention services through partnerships with community-based providers. State operated programs were funded at current capacity. A specific schedule for the roll-out of these funds was established by the Legislature. The roll-out began on July 1, 2009.

Activity 13: Create partnerships with community providers to provide services to children when there is not a provider available to implement the services on the IFSP in the NEIS program. **This activity is ongoing.**

• Since July 1, 2009, the Nevada Health Division, the entity responsible for administration of direct early intervention services for the State, has entered into provider agreements with four new community providers. Two new providers in the Southern region, in addition to the three (3) existing programs, began enrolling children in August 2009. This brought the total number of early intervention programs in the Southern Region to five (5). One (1) provider withdrew from service provision in July but was replaced by a new program that began enrolling children in the month of September. A new program in the Northwest region also signed a provider agreement with the State Health Division and began enrolling children in the month of September. Overall, at this time, the State has increased the number of early intervention service provider agencies statewide from five (5) to eight (8). Specifications for the roll-out of funds for the Northwest region included funds for an additional 18 new children per month for July though October

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2009, 17 additional children per month from November 2009 through May 2010 and an additional 18 children for the month of June 2010. In total, support was allocated for a total of 209 new children over the course of FFY09. In the Southern region, the roll-out was established at 41 new children each month for July 2009 through February 2010, 42 additional children for the month of March 2010, 41 new children for the month of April 2010, 42 new children for May 2010 and 43 new children for the month of June 2010. The allocation for the FFY09 in the Southern region was to provide services to a total of 496 new children. In the Northeast region, funds were rolled out for 5 additional children each month for the months of July and August 2009, 6 additional children in the month of September and 5 additional children each month from October 2009 through June 2010 for a total of 61 new children in FFY09. The Part C Office has tracked the list of eligible children waiting on a monthly basis to ensure there is a steady increase in the number of children being assigned to service providers. At the time of the issuance of this report, approximately 426 children have been assigned to new early intervention service provider programs.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (FFY 2009)[If applicable]

Procedural Activities:

Upon review, these activities are considered to be part of the ongoing operational process for early intervention programs. They will be eliminated in the SPP and will not be reported on in future APRs.

Activity 1: All early intervention programs will develop a corrective action plan with steps to correct noncompliance as soon as possible but not later than one year from the date of issuance of a finding related to the timely delivery of early intervention services. This activity is a component of the general supervision process and is being eliminated from the SPP for this indicator

• Two early intervention programs updated and continued to work on Corrective Action Plans (CAP) for on-going noncompliance during the FFY08 reporting period. Three additional programs had new findings issued in FFY08 based on monitoring activities reviewing child data from FFY07 and are also working on a CAP.

Activity 3: Develop and implement needs assessment for the IFSP Effective Practice Module to determine staff training and technical assistance needs to implement procedures related to timely delivery of service.

• It has been determined that, since the underlying cause for the systemic noncompliance is due to fiscal issues rather than personnel's understanding of requirements, this activity was not a priority in addressing this issue. Personnel needs for training and technical assistance are ascertained through program monitoring and internal team meetings. The Part C Office has also issued several technical assistance documents to early intervention programs to guide personnel activities in this area. It was decided this activity was not reasonably calculated to address the underlying issues relative to improvement for this indicator. **This activity is, therefore being eliminated** from the SPP per the FFY08 APR.

Activities 4 and 12: (4) Training and technical assistance on IFSP Effective Practice Modules will be provided across all regional programs. (12) Training on IFSP Effective Practice Modules with all new staff employed and ongoing training and evaluation for Effective Practices will continue yearly by region 2006-2010,

• Copies of the Effective Practice Modules for early intervention services are provided to all early intervention programs in electronic and/or paper format. Technical assistance regarding updates or clarifications is issued in written format to all programs by the Part C Office when appropriate. The Part C Office also provides training and technical assistance based on identified needs of individual programs as routine procedure. Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 1.

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Activity 5: Develop and implement evaluation processes related to determining the effectiveness of the implementation of timely service delivery and the results anticipated are being achieved.

• The evaluation of the effectiveness of implementation of timely initiation of services is conducted through standard general supervision procedures including desk audits and program monitoring. It was determined that a separate evaluation process would be duplicative. Therefore, this activity is being eliminated from the SPP for Indicator 1.

Activity 7: Program managers monitor child data on a quarterly basis to ensure all new services are being implemented in a timely manner for all children. **This activity is ongoing.**

 Progress for all programs under corrective action plans in this area have been monitored through monthly review of children waiting for services through the TRAC data system and/or required to submit quarterly progress reports to the Part C Office. Both procedures will be continued in the future until the State achieved full correction of noncompliance for this Indicator.

Activity 8: Nevada modified the program monitoring cycle from a three year cycle to a two year cycle of monitoring. This monitoring will continue to review child records for the timely delivery of services based on consent obtained from the parent/guardian and services implemented within 30 days from the development of the IFSP or as identified by the IFSP team. *This activity* is a component of the general supervision process and **is being eliminated from the SPP for this indicator**. It will only be addressed in Indicator 9 in future APRs.

• The Part C Office had hoped to be able to develop a Crystal Report that would utilize the Tracking Resources and Children (TRAC) database to track the timely initiation of services for all children. Further exploration revealed the current system does not have the capacity to track new services across all IFSP junctures. Therefore, data to monitor the timely initiation of services will continue to be generated through the review of a selection of child records. The monitoring schedule was, again, revised in FFY08 and now requires that programs conduct self-assessment on an annual basis incorporating child record review and TRAC data analysis, as appropriate. The Part C Office will conduct verification visits and/or focused monitoring with individual programs as deemed appropriate.

Activities 9 and 10: (9) If quarterly audits indicate services are not being provided in a timely manner, program managers will drill down into the data to determine the underlying reasons for the delay in implementation of services, and develop appropriate strategies to address the noncompliance, (10) Noncompliance is reported to the Part C Lead agency on a quarterly basis. Data will be analyzed for patterns and systemic issues and to determine the extent of the noncompliance. Statewide issues will be addressed through change in policies and procedures and/or guidance, training, and technical assistance. Enforcement actions will be implemented, as deemed appropriate by the Part C Office. *This activity is a component of the general supervision process and is being eliminated from the SPP for this indicator*.

• On-going monitoring of the issues around Indicator 1 continues to show that the underlying reason for the noncompliance is shortage of providers due to the State's budget crisis. Strategies developed and implemented by early intervention programs have included more intense internal tracking to ensure maximization of available personnel resources. A workgroup was also convened to evaluate internal processes to ensure that efficiency was a priority. A technical assistance document on internal efficiencies was generated and distributed to programs.

Activity 11: Provide training on TRAC for all service providers to ensure an understanding of the importance of data, and to ensure data are being collected accurately. *This activity is a component of the general supervision process and is being eliminated from the SPP for this indicator.*

• This activity is a critical on-going component of the general supervision system. Upon review, however, it was determined that this activity is not specifically targeting the current underlying issues related to this Indicator.

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Activity 15: Review of baseline data by the ICC annually to determine if the 30 day target remains a rigorous enough target, or if it should be lowered at a future date. While **this activity** may be revisited in the future, it is not a priority activity at this time and **is being eliminated from the SPP** effective this reporting period.

• It was determined that, given the State's current compliance status and underlying issues related to Indicator 1, this activity is not relevant to targeting improvement in performance at this time. Data relevant to Indicator 1 is reviewed with the ICC at each quarterly meeting, including the progress on corrections for individual children associated with the system complaint.

Activities Completed

Activity 2: Modify the IFSP Effective Practice Module to give guidance around timely delivery of services. *This activity was completed.*

• It was determined that it would be more appropriate to modify the Service Coordination Effective Practice Module to address the issue of timely initiation of services. This modification was completed in September 2007. Appropriate modifications were also made in the curriculum for the two-day new employee orientation which is required by the state for all new early intervention personnel.

Activity 6: Nevada legislative session for SFY06-07 increased funds for additional direct service personnel, each regional site will recruit and hire additional staff to support services being provided in a timely manner. *This activity was completed.*

• The activity, as specified, was completed. Funding to support new state positions was allocated for 2006-2007.

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Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

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Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.¹

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target	
2008	96% of children received services in the home or community-based settings	

Actual Target Data for 2008:

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on December 1, 2008.

Statewide:

2,052 children had an IFSP on December 1, 2008, of which **2,047** (**99.7%**) received their primary services in the home or community based settings.

Nevada's performance in FFY08 of **99.7%** exceeded the target for natural environments developed in the State Performance Plan (SPP) of 96%.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY 2008:

Nevada has been providing the majority of services for all children within the natural environment for the past seven years. Through the IFSP process the team determines the appropriate location for service delivery which is within the child's home or within the community. Nevada's IFSP form contains a page to be used by the team to provide justification if it is determined that a specific service cannot be achieved in the natural environment. Natural environment justifications are monitored through child record reviews during self-assessment. In order to increase options for families within their local communities, regional programs have developed partnerships with a variety of community programs to provide natural learning opportunities for infants and toddlers. Unless there is an appropriate justification, the majority of all services are provided either in the home or a community setting. The majority of children in early intervention receive a combination of services within the home and community. Children may be receiving home visits from interventionists in

¹ At the time of the release of this package, revised forms for collection of 618 State reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 State reported data collections.

addition to participating in community play groups. Because the reporting requirement for 618 data allows only one choice of setting, the primary service location is generally the home, which is not reflective of the variety of environments in which children are receiving services.

Table 2.A.: The following table compares percentages from FFY05 to FFY08 in providing services within the natural environment.

Program	FFY05	FFY06	FFY07	FFY08
Statewide	98.5%	99.6%	99.5%	99.7%

The activities below describe the types of partnerships that have been created to provide opportunities for children to receive early intervention in natural environments other than the home.

State Performance Plan Activity Update

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future Annual Performance Reports (APRs). Activities eliminated will be removed from the revised State Performance Plan (SPP) for 2009. Clarification is provided for the determination for each activity.

Activity 10: Development of Community Partnerships. This activity is ongoing.

The Southern region continues to increase the number of Explore and Learn Playgroups within the community. **Partnerships** are in place with Family to Family Connection, Parks and Recreation, and Gymboree. NEIS South also provides services to children within Nellis Air Force Base child care program. Participating families from the community are given information about children's development and early intervention services on a weekly basis. Easter Seals of Southern Nevada also has an inclusive child care facility which provides community play group opportunities for children receiving early intervention services.

- The southern region reported they did not have any new play groups created during FFY08 due to staff shortages. The following are their current activities:
 - 17 active groups out of 41 existing groups(the remainder of the groups are on hold right now)
 - 12 active groups at different locations out of 28 existing locations
 - 10 active MOU's out of 17 existing MOUs
 - 1 new MOU in the next couple months with University Medical Center
 - 3 new group locations possibly starting up by January (existing MOU's)

The Northwest region also has started Explore and Learn Playgroups with Family to Family Connection and is expanding those playgroups to the High School Child Care Centers. NEIS Northeast and Northwest have a partnership with Early Head Start and provide services within that agency. The Northeast region is collaborating with a new Migrant Head Start program as well.

NEIS Northwest has contracts with child care centers and home child care programs as early intervention partners and serves children within those programs as part of the natural environment.

- New Playgroups have been developed including expanding into new areas. There are a total of 15 playgroups available to families.
- Collaboration with Early Head Start through their expansion grant application to co-locate with early intervention. The grant application included renovation dollars to update the classroom facilities to accommodate Early Head Start. The grant was funded. During 2010 the building will be renovated and Early Head Start will move into the early intervention program building to serve

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24 children. There is an agreement to add playgroups when the children begin attending to expand options for interaction with typically developing peers.

- The Early Intervention Partners Project continues to offer services supporting up to 31 children in day care centers in Reno, Carson, and Rural areas.
- American Indian Population— furthering of collaborations with the local Native American tribes in order to serve more children.
- The two largest urban programs continue to form partnerships with community organizations to expand options for families within their local communities. The majority of services statewide are provided within the family's home or a combination of home and community.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Procedural Activities

The following activities are embedded within the General Supervision System and are not needed as separate improvement activities.

Activity 6 & 7: **Program monitoring** is provided on a two year cycle with programs completing a comprehensive self-assessment the first year. The following year the program works on correction for any identified findings through a Corrective Action Plan (CAP). Each region has a minimum of 10% of child records evaluated for program monitoring. Nevada has exceeded the state target across all regions for providing services within the natural environment, and there have been no program findings of noncompliance from child record review in this area.

• The program monitoring system has been revised for FFY09. WRRC and NECTAC provided assistance to Nevada Part C in partnership with the early intervention programs to determine a more effective monitoring system that incorporates the APR Indicators, the utilization of the TRAC data, and incorporates activities which have been embedded within the local programs quality assurance processes. The monitoring for next FFY will be comprised of each early intervention program completing a self-assessment in partnership with Part C staff. Part C will issue findings and work with the program on the Corrective Action Plan (CAP). Based on performance programs may be selected for a focused monitoring. This activity is a component of the general supervision process and is being eliminated from the SPP for this indicator. It will only be addressed in Indicator 9 in future APRs.

Activity 8: **TRAC Data are reviewed** to ensure services are provided within natural environments on a yearly basis for all regional programs. Program monitoring through child record review verifies the reasons for not providing the services within the natural environment are appropriate. The Part C office has had no findings of noncompliance related to natural environments across any regions during the year. **This activity** is a component of the general supervision process and **is being eliminated from the SPP for this indicator**. It will only be addressed in Indicator 9 in future APRs.

Activity 9: All new staff employed participates in a two day new staff orientation. This training provides an overview of all of the requirements under Part C of the Individuals with Disabilities Education Act (IDEA). It also provides detailed instruction related to the IFSP and implementation. All new staff receive copies of all of the Effective Practice Modules when hired. It was determined this year that the needs assessment was no longer needed for Effective Practice Modules, because the program monitoring results were identifying whether programs were implementing the practices. If areas are identified through monitoring than the training or technical assistance that is necessary is incorporated through the programs CAP This activity is a component of the general supervision process and is being eliminated from the SPP for this indicator.

Activity 5: **The evaluation plan is still under development**. Part C developed a subgrant with NECTAC during FFY06 and one of the deliverables is the evaluation plan related to implementation of the Effective Practice Modules. As Nevada has been concentrating on Child Outcomes and other new initiatives NECTAC is supporting, the evaluation process is pending. **This activity** is a component of the general supervision process and **is being eliminated from the SPP for this indicator**.

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State	

Overview of the Annual Performance Report Development:

See State Performance Plan 2010 which will be posted by May 1, 2010 at the State of Nevada publications web link: http://health.nv.gov/BEIS.htm.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

A. Positive social-emotional skills (including social relationships):

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to sameaged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy)
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level

nearer to same-aged peers but did not reach it divided by (# of infants and toddlers with IFSPs assessed)] times 100.

- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to sameaged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

- C. Use of appropriate behaviors to meet their needs:
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
 - e. Percent of infants and toddlers who maintained functioning at a level comparable to sameaged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

FFY	Measurable and Rigorous Target
2008	Target to be determined when exit data are available in FFY 2010

Actual Target Data for FFY 2008:

Target data will be determined when exit data are available in FFY 2010.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2008:

See State Performance Plan 2010 at http://health.nv.gov/BEIS.htm.

R Template – Part C (4)	<u>Nevada</u>
	State
Overview of Issue/Description of System or Process:	
Revisions, with Justification, to Proposed Targets / Impro Resources for FFY 2010 [If applicable]	vement Activities / Timelines /

Overview of the Annual Performance Report Development:

See Page 1.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target	
2008	A. Know their rights – 92% Target;	
2008	B. Effectively communicate their children's needs 91% Target	
	C. Help their children develop and learn 89% Target.	

Actual Target Data for FFY 2008:

A. Know Their Rights

Statewide: **339** Families responded to this question on the family survey reporting early intervention services had helped their family know their rights. **316** responses out of

339 were Strongly Agree or Agree for a percentage of 93.2%.

Nevada's performance in FFY08 of 93.2% exceeded the target of 92%.

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State	

B. Effectively Communicate Their Children's Needs

Statewide:

339 Families responded to this question on the family survey reporting early intervention services had helped the family effectively communicate their children's needs. **319** responses out of **339** were Strongly Agree or Agree for a percentage of **941**

Nevada's performance in FFY08 of 94.1% exceeded the state target of 91%.

C, Help Their Children Develop and Learn

Statewide:

340 Families responded to this question on the family survey reporting early intervention services had helped their children develop and learn. **324** responses out of **340** were Strongly Agree or Agree for a percentage of **95.3**%.

Nevada's performance in FFY08 of 95.3% exceeded the state target for this indicator of 88%.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2008:

In FFY07, Nevada reconvened a work group to review the existing Nevada survey. The workgroup was comprised of parents, ICC members, early intervention program representatives and the Part C office. The purpose was to review the survey to ensure that all the questions were clear. The group also elected to have the indicator questions added to the survey as written for the APR for state reporting. The work group agreed to the following changes:

- Shorter surveys contribute to higher return rates; therefore, the questionnaire was streamlined and reformatted to fit on one side of a sheet of paper.
- All families received an identical version of the survey with English on one side and Spanish
 on the other in order to capture individuals who may be more comfortable responding in
 Spanish but not identified as Spanish speaking.
- The cover letter was revised so all families received it with English on one side and Spanish on the other.
- The 2008 Family Survey consisted of 20 close-ended questions, one open-ended question, and two demographic questions.

In FFY08, the work group convened again and made the following minor revisions to the survey:

- The three questions required by OSEP were articulated more directly for clearer understanding.
- The "not sure" choice was changed to "undecided" to bring the response options in line with a true Likert Scale.
- Demographic questions were eliminated because they had not historically influenced data analysis.
- Wording was altered slightly to clarify that families were rating how early intervention impacted their lives rather than simply having knowledge of a process or service.
- The final survey consisted of 20 close-ended questions and a space for comments.

This year, 1,471 surveys were mailed in May 2009 to Nevada families whose children received early intervention services from NEIS in three regions of the state, including Easter Seals of Southern Nevada and REM Nevada. The survey was sent to families whose children had an active IFSP and had been receiving services for at least six months.

The response rate from the first mailing of the surveys was 19% statewide. 60 surveys were returned by the postal service as undeliverable. The Part C office worked with the early intervention programs for address updates and 38 surveys were resent to updated addresses. In addition, to increase the response rate, a follow-up survey was sent to a selection of families. This was based on an analysis

of returns by race, ethnicity and geographic region. A combination of 299 additional surveys was sent in July 2009. After both mailings, the total return of surveys was 340 for a return rate of 23.1%. Despite the strategies of sending second mailings, providing an online option, and streamlining the survey, the return rate remains relatively flat but meets the rate of return expected for a mailed survey. There were 218 out of 1,011 surveys returned in the Southern region for a return rate of 21.5%. In the Northwest and Northeast region there were 122 out of 460 for a return rate of 26.5. The Northeast region has the highest rate of return at 31.3%.

The same strategies to increase the survey return rate have been implemented statewide. The one factor that could contribute to a lower rate of return in the Southern region is the number of surveys returned due to mailing address being incorrect. Programs are asked to review those and provide a current address for a re-mailing of the survey. Not all programs in the Southern region have provided address correction, which could contribute to a lower rate of return.

Table 2.A. Comparison of FFY08 Performance to State Target

Sta	atewide	APR FFY07 Performance	SPP FFY08 Target	APR FFY08 Performance
Α.	Know Their Rights	91%	92%	93%
B.	Effectively Communicate Their Child's Needs	95%	91%	94%
C.	Help Their Children Develop and Learn	93%	89%	95%

Nevada exceeded the target for all three of the indicator questions, and additionally improved performance on two of the three responses from families from the previous year.

The complete survey report was posted on Nevada's website in November 2009. The survey results were disseminated to the ICC, regional programs, Health Administration, Aging and Disability Services Division and the Department of Health and Human Services.

The ethnicity breakdowns of the children for the families responding to the FFY 08 survey are as follows:

Table 2.B. Race/Ethnicity Breakdown of Surveys Sent (n – 1,471)

Statewide	White	Hispanic or Latino)	American Indian or Alaska Native	Black or African American	Asian or Pacific Islander
Population	682/1471	537/1471	10/1471	154/1471	88/1471
Receiving Survey	(46.36%)	(36.51%)	(.68%)	(10.47%)	(5.98%)
Population	188/340	103/340	2/340	21/340	26/340
Responded to	(55.3%)	(30.2%)	(.58%)	(6.1%)	(7.6%)
Survey (n = 340)					
Percent returned	188/682	103/537	2/10	21/154	26/88
within Race	27.5%	19.1%	20%	13.6%	29.5%
Ethnicity Group					

The rate of return within race and ethnicity groups was consistently 20% or better with the exception of Black or African American which had a lower response rate even with a second mailing of the survey. Overall, the survey results are representative of the geographic and race groups receiving the survey.

Surveys were sent in both English and Spanish to all families. A total of 50 surveys were returned in Spanish. There were 537 families of the total survey population identified as Hispanic or Latino which is 36% of the survey population. The return rate for this group was 30% of the total survey response.

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The overall satisfaction for Hispanic or Latino families was marginally higher statewide for all survey questions and all were above the 90% threshold.

State Performance Plan Activity Update

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future APRs. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Activity 1: Due to the number of respondents who indicated **Spanish as their preferred language**, the subcontractor, the University of Nevada, Reno, Center for Excellence in Disabilities has suggested all families who receive the survey get one in each language so they can return the one they choose to complete. **This activity is ongoing.**

The survey has been developed so English and Spanish are on every survey that is mailed.
 At this time, it has not resulted in a higher return rate, but does give families the option of responding to the survey in the language they feel most comfortable with.

Activity 2: The results of the Family Survey were presented to the Interagency Coordinating Council (ICC) on November 5, 2009 for **review and analysis for program improvement**. The survey results were also reviewed with program administrators and supervisors. Early intervention programs are encouraged to review parent comments to determine if there are areas for program improvement. **This activity is ongoing.**

Activity 3: The University of Nevada, Reno Center for Excellence in Disabilities continues to develop, disseminate, receive and analyze the data from the annual Family Survey. This activity is ongoing.

Activity 4 Develop strategies for outreach to underrepresented populations from survey analysis at the statewide quarterly management meeting, Part C, Regional Programs, 2006-2010, **This activity is ongoing.**

Activity 7: During FFY08 the survey will be distributed using two delivery methods, mail and internet survey. Families will be given a choice of how to respond. Each survey will be given an identifying number to ensure families can respond one time per child, 2009-2010. **This activity is ongoing.**

• For this survey an online option was given to families in addition to the mail in option. This was the first time this option was offered and only six (6) families responded online. However, three (3) of the six (6) respondents used incorrect identifiers for the survey so these could not be counted. Since this was the first year for this strategy it was determined another year might offer a better return, and the instructions for use of the online option need to be clearer.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable]

Upon review, these activities are considered to be part of the ongoing operational process for early intervention programs. They will be eliminated in the SPP and will not be reported on in future APRs.

Activity 5: As a component of annual monitoring for each program, **child record reviews** include documentation of review of procedural safeguards and receipt and review of parent's rights.

Monitoring	Priority	- Page	19

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• This activity has been embedded within the new self-assessment record review to be completed by each early intervention program annually. **This activity** is a component of the general supervision process and **is being eliminated from the SPP for this indicator**. It will only be addressed in Indicator 9 in future APRs.

Activity 6: All new employees, as well as employees designated by supervisors, attend **mandatory training** which includes family centered practices, the development of functional outcomes and appropriate strategies, the family needs assessment, and procedural safeguards. Additional **training and technical assistance** is also provided on an as needed basis, which includes the review of all Effective Practices Guidelines. Because this is an on-going procedure for general supervision, **this activity is being eliminated from the SPP for Indicator 4.**

Overview of the Annual Performance Report Development:

See Page 1.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2008	The target established for this reporting period is .7%

Actual Target Data for FFY 2008:

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on **December 1, 2008**.

Statewide:

On December 1, 2008, a total of **263 infants** ages birth to 1 year statewide had an Individualized Family Service Plan (IFSP). This number divided by the U.S. Office of Special Education Programs (OSEP) projection of 40,346 for the 2008 state population of infants, birth to age one, indicates that **.65%** (OSEP Table C13) of the infant population had an IFSP.

Table 5.A. OSEP General Population Estimates for Nevada, Infants Ages Birth to 1 Year

Year	Population Estimate	Change in Population (+/-)	Percent of Change (+/-)
2006	37,901	+3,715	+10.87%
2007	40,917	+3,016	+7.96%
2008	40.346	-571	-1.40%

Table 5.A. reflects the State's status in the overall population of children ages birth to 1 year from 2006 through 2008. This table demonstrates the first estimated reduction for this segment of the population in Nevada in recent years.

Table 5.B. Infants Ages Birth to 1 Year with IFSP on December 01

Year	# Infants with IFSP	Change in # w/IFSP	% Population Serve	Percent of Change (+/-)
2006	255	+93	.67%	
2007	372	+ 117	.91%	+ 45.88%
2008	263	-109	.65%	- 29.30%

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Table 5.B. reflects the State's status in the number of children reported as having an IFSP on December 1 of each year. This table shows there was a significant reduction in the number of infants, ages birth to 1 year, reported in the December 1, 2008 Child Count compared to the December 1, 2007 count.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2008:

There was slippage in the number of eligible infants, age birth to 1 year, in this reporting period compared to the December 1, 2007 count. The number of infants with an IFSP on December 1, 2007 was 372 as compared to **263** reported on December 1, 2008. This is 109 less than reported for December 1, 2007. Based on the OSEP projected population of 40,346, Nevada served **.65%** of the State's total population of infants, age birth to 1, compared to .91% on December 1, 2007. Nevada did not meet either the established SPP target of .7% for the percent of the birth-to-1 year population served in FFY08, the national average of 1.04% or the national target of 1%.

The Part C Office also utilized population estimates issued by the Nevada State Demographer to analyze regional performance in order to determine whether the slippage in this indicator was specific to a particular area/s of the State. Population estimates issued by OSEP are not broken down by county or region and the sum of the regional population estimates issued by the Nevada State Demographer is not equal to the statewide population estimate published by OSEP for the same timeframe.

When disaggregated by region, the data showed that the percent of change (slippage) in performance for identification of eligible infants, age birth to 1 year was:

- Northeast Region down by six (6) children (50%);
- Northwest Region down by fifty-four (54) children (43.90%); and
- Southern Region down by forty-nine (49) children (20.68%)

The Part C Office is conducting further investigation of the issue to determine the underlying cause/s for this slippage in performance. It is notable that the Nevada State Bureau of Health Statistics, Planning and Emergency Response reports the birth rate in Nevada has declined by 12.2% over the past two years. The underlying causes will also be explored on a regional basis during the monitoring Self-Assessment process which will be implemented by all local early intervention programs beginning March 2010.

State Performance Plan Activity Update

The activities proposed in the SPP were reviewed for appropriateness and progress during this reporting. As part of that review, it was determined that some of the activities identified in the SPP are more operational in nature than specifically targeted to improvement and would be consistently reported as ongoing every year. In order to be more focused in activities designed to target improvement, the Part C Office will not continue to report annually on activities that are on-going operational procedures unless it is determined that some aspect of the activity will target improvement for this indicator. A brief summary of each activity is included below along with an update on relative action taken during the FFY08 reporting period. A full statement of the activity is included in the State Performance Plan which is available on the State's website at http://health.nv.gov/beis.htm.

Activity 1: Address issues of funding and personnel resources in order to ensure capacity to increase the identification and provision of services to infants, age birth to 1 year.

• While this is an on-going process, the State's current budget crisis and the relationship to early intervention services makes reporting on this activity highly relevant. The State Legislature, in the SFY2009 session, appropriated \$5,170,785. of new state general fund dollars for early intervention services for the next biennium (FFY09-10). With the addition of the American Recovery and Reinvestment Act (ARRA) funds, \$9,071,785 in new funding was allocated for early intervention services. A full description of the specifics for the roll-out of these funds is included in Indicator 1, Activity 13. Since the emphasis for these funds was to expand service delivery through agreements with community providers, this will also help to expand the awareness of the availability of early

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intervention services. Each new provider agency enrolled has assigned a representative to the ICC Child Find Committee and will distribute public awareness materials to their contacts and activities. **This activity is ongoing.**

Activity 7: Local early intervention (EI) programs maintain ongoing Child Find and Outreach activities to educate primary referral sources about the availability of early intervention consistent with the State Child Find Plan. **This activity is ongoing.** All EI programs are required to submit quarterly reports on public awareness/child find related activities conducted at the local level. This is a standard data collection process and is linked to the program's Self-Assessment/Monitoring process. During this reporting period, all EI Programs but one complied with this requirement. The noncompliant program is no longer a service provider for the State.

• Given the slippage in this indicator during this reporting period, it has been determined that a more focused analysis of this area is warranted to determine underlying causes and to refine both statewide and local plans accordingly.

Activities 8 and 9: Collaboration with hospitals and neonatal intensive care units to ensure early referrals for infants potentially eligible for El services. **This activity is ongoing.**

Hospitals and other medical providers are included in data collection as a primary referral source.
 The status of formal and informal collaboration is reviewed as part of the program's self-assessment process.

<u>Activity 11</u>: Develop and issue public service announcements to inform the general public about El Services. This activity is ongoing.

• This activity has not been implemented to-date but will become priority relative to this indicator to address the slippage in performance.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008

The following activities were reviewed for this reporting period and determined to be either operational/procedural activities that are ongoing in nature or activities that have been completed or eliminated. Activities that have been determined to be completed will not be reported on in future APRs. Activities that are eliminated will be removed from the revised SPP for 2009. Clarification is provided for each activity.

Procedural Activities

Activity 2: Maintain collection and analysis of data relative to primary referral sources both statewide and by regions in order to target Public Awareness and Outreach activities. *This activity* is a component of the general supervision process and is being eliminated from the SPP for this indicator.

- This is a standard operational process that is ongoing. Referral Data are collected throughout the year and is summarized on a quarterly basis. The Data are reported to the ICC and the ICC Child Find Committee at regular meetings and to other interested parties upon request. This activity will only be reported on in future APRs if there has been particularly relevant action taken or significant change is made to the operational process.
- While not in this reporting period, a statement of clarification was issued to all El Programs by the Part C Office in September 2009. This was issued as a "Tip of the Week" and instructed programs to ask the parents making a personal referral on their child how they learned about El services. This will assist in the analysis of referrals relative to outreach activities and community referral sources.

Activity 4: ICC Child Find Committee

 This is an established on-going committee of the ICC. The Committee is scheduled to meet at least twice a year to review the status of implementation of the Public Awareness and Child Find plan and to recommend changes, as appropriate. Members assist in coordinating activities across agency lines and recommend initiatives to the Part C Office. This activity will only be reported on in future APRs if

APR Tem	plate –	Part	C((4)
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there has been significant change to the operational process or action is taken by the Committee that is particularly relevant and targeted to improvement for this indicator **This activity is being eliminated from the SPP for this indicator**.

Activity 6: Submitting needs-based budget requests to the Nevada Legislature in order to maintain adequate funding and resources to provide early intervention (EI) services. *This activity is eliminated for future reporting.*

• This is an on-going activity required by the State for all Departments. This may impact performance in this indicator but is not sufficiently targeted to ensure improved performance for this indicator.

Activity 12: Developing and maintaining partnerships with State and County Social Services to ensure appropriate referrals to Part C. *This activity is eliminated for future reporting.*

• This is an on-going activity. Social Service agencies are included in data collection as a primary referral source and the status of formal and informal collaboration is reviewed as part of the program's self-assessment process.

Activities Completed, Revised or Eliminated

Activity 3: Evaluating the Screening and Monitoring (SAM) Program to ensure appropriate referrals to Part C. This activity was completed effective FFY06.

Activity 5: Comparing Nevada's performance in this indicator to states with similar definitions. *Nevada is eliminating this activity effective FFY08.*

• OSEP has discontinued the requirement for reporting this data. It has been noted in the past that due to the difference in state systems and the number of states changing their eligibility definition in recent year that the comparison of performance across states yielded little, if any, support for improvement planning.

Activity 10: Offering training to community pediatricians regarding red flags for developmental delay. **This** activity was completed effective FFY06

Activity 13: Development and implementation of a Single Point of Entry for the Southern Region.

• This activity was reported completed effective FFY07. However, implementation of the initiative was evaluated during FFY08 and determined to not be fiscally efficient. It was discontinued in October 2009 and the processing and dispersing of referrals to various service providers in the Southern region reverted to the NEIS Program. This activity is eliminated for future reporting.

Overview of the Annual Performance Report Development:

See Page 1

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2008	The target established for this reporting period is 1.78%

Actual Target Data for FFY 2008:

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on **December 1, 2008**.

Statewide:

On December 1, 2008 a total of **2,052** infants and toddlers in Nevada, ages birth to 3 years, had an IFSP. This number divided by the U.S. Office of Special Education Programs (OSEP) estimate of 121,331 for the general population of infants and toddlers, birth to age 3, in the state (OSEP Data Table (C13) indicates that **1.69%** of the population was served.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2008:

The State had an increase in the number of eligible infants and toddlers, age birth to 3 years, in this reporting period. The number of infants and toddlers reported to have an IFSP on December 1, 2007 was 1,986 compared to 2,052 reported on December 1, 2008. This is an increase of 66 children over the number reported for December 1, 2007. Based on the OSEP projected population of 121,331, Nevada served 1.69% of the State's total population of infants, age birth to 3. Nevada did not meet either the established SPP target of 1.78% for the percent of the birth to 1 year population served in FFY08 or the national target of 2%.

Table 6.A. OSEP General Population Estimates, Infants and Toddlers Ages Birth to 3

Year	# General Population	+/- Change From Previous Year	% Change From Previous Year
2006	111,945	+8.028	+7.78%
2007	119,218	+7,273	+6.5%
2008	121,331	+2,113	+1.77%

Table 6.A. provides data on Nevada's population growth for infants and toddlers, age birth to 3 years, from 2006 to 2008 as indicated by general population estimates released annually by OSEP. Estimates

show an increase in population each year but a continuous decline in the rate of population growth for the three year period reflected. The most significant reduction (from 6.5% to 1.77%) in the rate of growth was from 2007-2008.

Table 6.B. Infants and Toddlers Ages Birth to 3 with IFSP on December 01

Year	# Infants with IFSP	+/- Number w/IFSP	% Population Served	+/- % of Population Served
2006	1,520	+103	1.36%	Maintained
2007	1,986	+ 466	1.67%	+30.6%
2008	2,052	+66	1.69%	+ 3.32%

Table 6.B. reflects the statewide trend in the number and percent of infants and toddlers, age birth to 3, with an IFSP on December 1st from 2006 thru 2008.

The number and percent of population of infants and toddlers, age's birth to 3, with an IFSP on December 1st has continued to increase with the most significant increase being in FFY07. **In FFY08**, the **number of children increased by 66 and the percent of population served increased by .02%** over the number reported for December 01, 2007.

Data was reviewed on a regional basis to evaluate performance for each individual region. The data utilized in this analysis is based on the State Demographer's population projections since the data published by OSEP is not broken down by county or region. The sum of the regional population estimates issued by the Nevada State Demographer is not equal to the statewide population estimate published by OSEP for the same timeframe.

Analysis by region shows that:

- the Southern region increased the total number of infants and toddlers with an IFSP on December 1, 2008 by 134 (10.51%) over the count reported for December 1, 2007;
- the Northwest region decreased in the total number of infants and toddlers with an IFSP on December 1, 2008 by thirty-nine (39) children (-6.41%) compared to the count reported for December 1, 2007; and
- the Northeast regions decreased in the total number of infants and toddlers with an IFSP on December 1, 2008 by 29 children or (-28.16%) compared to the count reported for December 1, 2007.

Table 6.C. Performance for New Referrals Statewide

	FFY07	FFY08	Difference	% Change
Total New Referrals	4,172	4,147	-25	60%

Table 6.C. compares the total new referrals from FFY07 to FFY08 and the percent of change for this reporting period.

Analysis of new referral data for FFY08 by primary referral source shows that, while down by 203 (-9.76%) from FFY07, the medical community continues to account for the majority (1,876 or 45.24%) of the total referrals statewide. Referrals from Parents/Other Friends/Relatives increased by 190 (15.46%) for the reporting period. Referrals from Social Service Agencies, which was the third most frequent referral source, was also down by 30 (-4.59%). Referrals from both Newborn Hearing and Project Assist increased over the previous reporting period.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2008:

The State increased the number of eligible infants and toddlers, age's birth to 3, statewide by 66 children. This improvement is based solely on growth in the Southern region as the Northwest and Northeast regions had slippage in this area. All early intervention programs will conduct Self-Assessment beginning March 2009. Specific emphasis will be placed on performance relevant to this indicator.

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The state also experienced a slight decline in the number of new referrals received during this reporting period. Further investigation is needed to determine the reasons for the decline. Current activities will continue to be implemented and refined to ensure improvement. Again, it is evident that the status of the economy has impacted the rate of population growth in the State. The greater Las Vegas area has experienced one of the highest foreclosure rates in the nation. Data has also shown a significant decline in the birth rate (12.2%) in the State in the last two years. Slippage relevant to this indicator will be presented to the ICC and the ICC Child Find Committee and SPP activities will be updated as appropriate. The underlying causes will also be explored on a regional basis during the monitoring Self-Assessment process to be implemented by all local early intervention programs beginning March 2010.

State Performance Plan Activity Update

The activities proposed in the SPP were reviewed for appropriateness and progress during this reporting. As part of that review, it was determined that some of the activities identified in the SPP are more operational in nature than specifically targeted to improvement and would be consistently reported as ongoing every year. In order to be more focused in activities designed to target improvement, the Part C Office will not continue to report annually on activities that are on-going operational procedures unless it is determined some aspect of the activity will target improvement for this indicator. A brief summary of each activity is included below along with an update on relative action taken during the FFY08 reporting period. A full statement of the activity is included in the State Performance Plan which is available on the State's website at http://health.nv.gov/beis.htm.

Critical Activities During for This Reporting Period

Activity 1: State Legislature to allocate funds for positions to meet the growing need due to population growth. *This activity is ongoing.*

• The state continued to experience extreme budget crisis during the FFY08 reporting period. Some vacant personnel positions were either frozen or eliminated. The Governor's proposed budget for early intervention services included almost \$10 million in new funds for services for infants and toddlers with disabilities. This portion of the budget was supported by the State Legislature. The State Health Division continued to pursue public/private partnerships to expand early intervention provider resources through the additional funds allocated.

Activity 12: Community education opportunities will be provided to referral sources regarding early intervention (EI) services to promote appropriate referrals. *This activity is ongoing.*

• All El programs are required to submit a quarterly report to the Part C Office on local Child Find and public awareness activities. These activities support the overall State Child Find Plan and include activities designed to educate the public and primary referral sources on the availability of early intervention services. A variety of activities were reported including articles published in local newspapers and distribution of public awareness materials through mail-out, postings in local businesses and through various events hosted in the community. Specific collaboration activities took place with Early Head Start, Private Charitable Organizations and Foundations, the State Public Health Nurses programs, and Higher Education training programs for health care providers. This list is not an all inclusive list.

Activity 13: Disseminate Child Find Materials to community referral sources to assist them in making referrals to early intervention services. *This activity is ongoing*.

 Materials designed to inform the public about the EI system and how to make referrals to the system was distributed through both local programs and the Part C Office during this reporting period. Informational documents and other child find related materials are developed and purchased through the Part C Office and made available to local programs for distribution.

Activity 14: Develop Public Service Announcements (PSAs) regarding red flags for developmental delays to ensure public awareness of early intervention services.

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• The Part C Office continues to pursue the process for developing **Public Service Announcements** regarding red flags for developmental delays to ensure the general public is aware of early intervention services.

Activity 16: Provide training for child care providers around red flags for developmental delays and the availability of early intervention services. *This activity is ongoing.*

Personnel in local early intervention programs have conducted a variety of trainings for childcare personnel regarding early intervention services, screening, and referral procedures. This has been provided as direct training and technical assistance to child care program personnel and also as part of the process of implementing the IFSPs of individual children in the child care setting. The percent of referrals from child care providers remain low for this reporting period; however, it is not possible to determine at this time how many of the referrals indentified as parent referrals (which increased substantially in this reporting period) are a result of information provided by child care program personnel.

Activity 17: Memorandums of understanding with local school districts will include partnering for local child find activities including screening. *This activity is ongoing.*

The Lead Agency maintains a **Cooperative Agreement** with the State Education Agency which includes an agreement that both agencies will "encourage collaborative screening efforts including the development and use of jointly recognized screening instruments, joint participation in screening activities, and other processes agreed upon at the local level." Regional program personnel, through Quarterly Child Find Reports, have documented collaboration with local school systems in joint child find activities during this reporting period. To date, local MOUs have not been established specific to child find activities.

Activity 18: Collaborate with other community providers to offer screenings at their program locations or events. *This activity is ongoing.*

Early intervention programs statewide have documented participation in numerous collaborative efforts with other community agencies to promote identification of infants and toddlers with disabilities. A list of examples follow but this is by no means an exhaustive list but provides some idea of the broad spectrum of collaboration across the state. NEIS Northeast has a strong working relationship with Head Start and the Family Resource Centers. They also participate on the Children with Special Health Care Needs Board. They partner with the Knights of Columbus in fundraising efforts in high-traffic areas. Part of the proceeds from the funds raised are donated to the program's parent fund which is used to assist families in obtaining some supports and services that are not required by IDEA. NEIS Northwest has established a relationship with the University of Nevada, Reno for internship for students in the Early Childhood Special Education Program as well as strong relationships with the Neonatal Intensive Care Units (NICUs) at local hospitals. NEIS South, through collaborative relationships, established numerous community play groups where eligible children are able to participate with typically developing peers. These playgroups are so popular that there are waiting lists for typically developing children to participate. Southern programs have also established relationships with numerous medical providers and with the University of Nevada, Las Vegas to support the identification of infants and toddlers with disabilities. All programs also report a working relationship with the personnel associated with the Division of Child Family Services (DCFS).

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 [If applicable]

All SPP activities were reviewed for this reporting period and determined to be either operational/procedural activities that are ongoing in nature or activities that have been completed or eliminated. Activities that have been determined to be completed will not be reported on in future APRs. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for each activity.

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Procedural Activities

Activity 5: Provide Training and Technical Assistance on Intake Evaluation & Eligibility (IE&E) and IFSP Effective Practice Modules across all regions and programs.

 Training on the Effective Practice Modules is provided internally to local programs through regular team/staff meetings. Training and TA is provided by Part C Office personnel primarily on an asrequested basis or as a result of needs identified through the general supervision process. As appropriate, specific areas are cited by the Part C Office in descriptions of required corrections in response to complaint investigations. This activity is being eliminated from reporting on future APRs.

Activity 6: Develop and implement evaluation processes to determine the effectiveness of implementing timely IFSP development to ensure anticipated results are achieved. **This activity is being eliminated from reporting on future APRs.**

Early intervention programs continued internal efforts to make the entry team processes more
efficient in order to facilitate more timely eligibility determination and development of the IFSP.
The Part C Office collaborated with all early intervention (EI) programs to develop and
disseminate an "Internal Efficiencies" TA document in December 2008. During this reporting
period, all initial IFSPs were developed by the State operated programs as existing community
partner programs were assigned children who had an IFSP developed but had not had services
initiated.

Activities 7-9: (7) Program managers monitor the status of timely development of IFSPs on a monthly basis through child data; (8) If monitoring of data finds IFSPs not being developed in a timely manner, program managers will identify the underlying causes; and (9) Programs will report noncompliance to the Part C Office on a monthly basis. The Part C Office will analyze the data for patterns, system issues, the need for updating policies and procedures and will provide TA based on conclusions. **This activity is being eliminated from reporting on future APRs.**

• The Part C Office continues to monitor performance related to timely IFSP development through the Part C Database on a quarterly basis. Local NEIS programs have developed and utilized internal scheduling and tracking procedures to ensure timeliness of IFSP development.

Activity 10: December 1 child count data will be disaggregated by County to determine the percent of population served in each county. Outreach strategies will be developed for any underserved areas. **This activity is being eliminated from reporting on future APRs.**

 The data regarding performance relative to the number of children and percent of population served is routinely included as part the monitoring process. If a geographic region does not meet the national target or the target established in the SPP, early intervention programs in that region are required to include activities in their monitoring corrective action plans regarding increasing the percentage of the infant toddler population served.

Activity 11: Train on IE&E and IFSP Effective Practice Modules with all new staff employed. **This activity** is being eliminated from reporting on future APRs.

• This is a routine operational activity. All newly hired early intervention service providers are required to participate in a two-day new employee training by the Part C Office. Evaluation of implementation of the content of the training is evaluated through program monitoring.

Activities Completed

Activity 2: Appoint Higher Education Representative to the ICC. This activity completed as of FFY06

Activity 3: Modify IFSP and Intake, Evaluation and Eligibility (IE&E) Effective Practice Modules to expedite timeline from referral to IFSP development. **This activity completed as of FFY06.**

Activity 4: Develop and implement needs assessment for IE&E and IFSP Effective Practice Guidelines to guide training and technical assistance to service providers. **This activity completed as of FFY06.**

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Activity 15: Develop budget request for future legislative sessions documenting needs for additional personnel resources for early intervention. This activity is being eliminated as being specific to Indicator 6.

• It was determined this activity is too broad to be successfully measured for direct impact for Indicator 6. In addition, preparing and submitting budget request, based on documented need, is required for each program within the various State Departments. This is an on-going process.

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Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

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Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

FFY	Measurable and Rigorous Target
2008	100% of eligible infants and eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

Actual Target Data for FFY 2008

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system for the period of July 1, 2008 through June 30, 2009.

Statewide:

1,707 infants and toddlers were evaluated and found eligible for Part C services, which included evaluation, assessment and the development of the IFSP. Of those, 343 had documented exceptions that the 45-day timeline could not be met due to family circumstances and 148 did not meet the 45-day timeline due to program circumstances. There were 1,559 infants and toddlers that were evaluated, found eligible and an IFSP was developed within the 45-day timeline, this includes the 343 documented family exceptions, which is 91.3%.

The list of documented family circumstances for not meeting the 45-day timeline included the following:

- Family cancelled appointments
- Child was hospitalized or ill

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- Parent could not schedule the appointment within 45 days
- · Parent had a medical emergency or was ill
- Referral was made while child was still in the Neonatal Intensive Care Unit

Table 7A: 45-Day Timeline Exceptions

Total N=1707	Completed within 45- Day Timeline	Exceptional family circumstances	Delay in IFSP Program Reasons
N	1559/1707	343/1559	148/1707
Percent	91.3%	22%	8.7%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2008:

During the course of this fiscal year within the southern region of the state, which is the largest region, the State early intervention program began processing all intakes and referrals for the entire region. In order to facilitate the timely delivery of services, community partner agencies that could accept more children during the month were taking children with IFSPs developed to ensure services began as soon as possible. In addition, this fiscal year was a time of economic crisis for the State of Nevada and there were hiring freezes which resulted in vacant staff positions

The following table shows that was slight slippage from FFY07 to FFY08.

Table 7.B. Statewide Improvement in Meeting 45-day Timeline

Number and Percent of IFSPs Completed within 45-Days	FFY 2004	FFY 2005	FFY 2006	FFY 2007	FFY 2008
Statewide	318	783	1,596	1,752	1,559
	25.0%	67.1%	92.5%	94.1%	91.3%

Correction of Noncompliance Related to Indicator 7:

Table 7.C. Identification and Correction of Noncompliance

FFY	Number of Findings of Noncompliance Related to Indicator 7	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY07	1	1	0	0
FFY 08	5	To be reported in the FFY09 APR		

Current data from the State's data tracking system, which is run on a quarterly basis for this indicator, in conjunction with program monitoring through child record reviews was utilized to verify the correction of noncompliance and to ensure all eligible infants and toddlers were evaluated, assessed and had an IFSP within 45-days. In verifying corrections, Nevada ensured that all early intervention programs were correctly implementing the 45-day timeline by reviewing updated data. All children, whose timeline was not met, have received initial evaluations, assessments and IFSP meetings, although late, unless the child was no longer within the jurisdiction of the State.

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The aggregate data for the year related to 45-day timeline shows some program slippage. In analyzing data across all programs, it was noted the slippage is attributable to two programs within the Southern region and two programs in the north. In the north, it was determined there was a break down in the internal tracking process, and realized that no one was consistently tracking the 45-day timeline. Once they realized the problem existed, they were able to correct the issue and by the end of the 4th quarter were performing at 99.2%. Two other programs within the state were at 100% performance on 45-day timeline. Two programs had slippage early in the fiscal year and worked on corrective action steps to resolve the noncompliance, but were unable to bring up their percentage sufficiently by the end of the 4th quarter due to the shortage of staff and resources.

In January 2009, the Nevada Legislative session convened which developed budgets for the State Fiscal Biennium of 2010-2011. For the SFY 2009/2010 the State Health Division did receive a substantial funding increase to support early intervention services statewide. This funding was not available for the reporting period of this APR.

The funding increase began July 1, 2009 and the results will be reported in the FFY09 APR. Since the funding was allocated, the Southern region has been able to hire staff positions that have been vacant over the past year. During FFY09 the State Health Division, as a result of this funding has also contracted with two additional private early intervention providers in the Southern region and one new provider in the Northwest region, which will assist with increasing program capacity. All community early intervention programs will be in growth mode next fiscal year, but it will take a full year to increase the total capacity of the system. New programs have to hire new staff; provide training and mentoring in order to be able to serve an increasing number of children, also the funding was provided on an incremental basis increasing child count each month of the year. The impact of the funding increase to support the hiring of additional staff in the Southern region and the result of contracting with three additional early intervention providers will be reported in next year's APR.

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future APRs. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Activities for this Reporting Period:

Activity 10: The two urban regions have implemented a core entry team process that has assisted with compliance on the 45-day timeline. *This activity is ongoing.*

• Within each region there are core entry Multidisciplinary teams (MDT) to determine eligibility that are standing weekly appointments. In the Southern region there are approximately 75 MDTs weekly and in the Northwest region there are about 20 MDTs weekly. In addition, the NEIS programs have moved to an electronic scheduling system. This has created more internal efficiency for assigning staff to MDTs and to reassign staff if someone is out sick versus cancelling the MDT meeting. The scheduling system also allows for greater flexibility in slotting families into cancelled appointments.

Activity 12: The state is limited in what can be provided in the way of incentives. *This activity is ongoing.*

The Bureau office and Part C provide a variety of program acknowledgements through newsletters, Fast Notes from the Bureau Chief, recognition at weekly and quarterly management meetings, to recognize the hard work of all staff related to correction of noncompliance. At the regional program level, staff are kept apprised of the progress that has

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been achieved and how their activities contributed to the overall correction within this indicator.

Procedural Activities:

Upon review, these activities are considered to be part of the ongoing operational process for early intervention programs. They will be eliminated in the SPP and will not be reported on in future APRs.

Activity 2: The Governor appointed representatives from the University of Nevada Reno and University of Nevada, Las Vegas, Early Childhood Special Education faculty to the ICC to support collaboration around personnel preparation concerns and to increase the number of personnel obtaining the Early Childhood Special Education (ECSE) Endorsement. The Agency Co-Chair position was vacated during FFY06. The representative of higher education on the ICC from the University of Nevada Reno agreed to fill the Agency Co-Chair position.

• As a result of the ongoing partnership between Nevada Early Intervention Services and the Universities there were 3 developmental specialist (DS) personnel in the Northwest region and 9 DS in the Southern region who received their Early Childhood Special Education Endorsement in FFY08. This activity is being eliminated from the SPP for this indicator.

Activity 5: Training and technical assistance on IE&E and IFSP Effective Practice Modules was provided across all regional programs.

• All new employees continue to receive New Employee Orientation including training on IE&E and IFSP Effective Practice Modules. This activity is being eliminated from the SPP indicator.

Activity 7: **Program performance is audited monthly** to ensure children being referred are receiving timely development of IFSPs.

• Within each region there is ongoing development and review of the entry team process to ensure that children referred are being evaluated in a timely manner, and to make program improvements as needed. The Data Manager created reports for the program manager to run monthly audits on the number of new IFSPS, children beyond the 45-day timeline and the number of children in referral status, to assist programs with continued program improvement. In addition, a coding process has been created for TRAC to be able to code family exceptions to the 45-day timeline. This activity is being eliminated from the SPP for this indicator.

Activity 8: If through quarterly audits conducted by the Part C, IFSPs are not developed in a timely manner:

 Program managers/supervisors, The Part C Coordinator and the Part C contact meet with regional program managers/supervisors to drill down into the data to determine the underlying reasons for the delay in development of IFSPs and develop appropriate strategies to address the noncompliance as needed, This activity is being eliminated from the SPP for this indicator.

Activity 9: Programs report on corrective action activities related to the 45-day timeline if it is found as a compliance area through their regional program monitoring.

The CAP requires that the program provide a quarterly update on progress toward correction of noncompliance during the year of correction. Part C will support regional programs related to systemic issues affecting the 45-day timeline such as policy and procedural issues, training and technical assistance or enforcement actions, if appropriate, **This activity is being eliminated from the SPP for this indicator.**

Activity 11: All employees receive a two day new staff orientation which includes content from the IFSP and IE&E Effective Practice Modules.

New staff are provided with copies of the modules and Part C staff and programs incorporate
module content into ongoing training and technical assistance. All new effective practice
modules developed are reviewed by supervisors over a number of months through team

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meetings to ensure staff understanding of content. There were two trainings held in FFY 08, one in the Northwest and one in the South. In the Southern Region NEIS, ESSN and REM all had staff attend. **This activity is being eliminated from the SPP for this indicator.**

Activities Completed

Activity 1: The State Health Division will be presenting a budget proposal for SFY10-11 at the Legislative Session beginning February 2009. Due to Nevada's severe economic crisis, it is unlikely that early intervention will see an increase of funding for the next biennium.

• The State Health Division received an additional \$1,092,041 in additional state dollars for early intervention. These funds were designated to increase the capacity of early intervention services statewide through community provider contracts. The funds were prorated over the year anticipating programs could only grow by incremental amounts monthly. **This activity was completed.**

Activity 3: Modify the IFSP Effective Practice Module to provide guidance for staff on expediting the process from referral to the initial IFSP meeting to ensure timely IFSP development.

• The IFSP Needs Assessment was developed and disseminated. NECTAC provided technical assistance in spring 2005 related to the needs assessment, training plan and evaluation plan. **This activity was completed.**

Activity 4: Develop and disseminate a needs assessment for the IE&E Effective Practice Module to determine staff training and technical assistance needs to implement procedures related to timely IFSP development,

• This module was released to staff in April 2006. Data was analyzed and technical assistance is provided as needed. **This activity was completed.**

Activity 6: Developed a subgrant with NECTAC in FFY06 to provide training and technical assistance on priority areas,

A part of the subgrant is to continue the work begun in 2005-2006 related to evaluation of the
processes and implementation of the Effective Practice Guidelines. Due to other pressing
priorities, the evaluation component was delayed so that the technical assistance could
focus on the Child Outcomes process. This activity was completed.

Activity 13: Allocate a budget for SFY08-09,

• This budget resulted in increased funding for 79 children in the first year and an additional 2 children in the second year of the biennium. All of the funds were designated to increase the capacity of the private sector, and was allocated to the two community partners in the Southern Region, Easter Seals of Southern Nevada and REM Nevada. The state service delivery system did not receive an increase of positions. **This activity was completed.**

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Overview of the Annual Performance Report Development:

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Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delay.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

A. IFSPs with transition steps and services.

Statewide: The compliance percentage for this indicator was derived from child record review data from one early intervention program due for monitoring. Of the thirteen (13) children exiting Part C who have an IFSP with transition steps and services, thirteen (13) children exited Part C. Percent=(13/13)*100=100%. Nevada recognizes this is a small number of files, therefore, in FFY09, Nevada is moving from cyclical monitoring to annual self-assessment. This will result in additional data across all programs.

B. Notification to LEA, if child potentially eligible for Part B

Statewide: The compliance percentage for this indicator was derived using the Tracking Resources and Children (TRAC) child data collection system. In completing the 618 data for Table 3, Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion from the November 1, 2009 submission (2008-2009) to calculate the number of children exiting Part C and potentially eligible for Part B. There were 1,017 children exiting Part C and potentially eligible for Part B where notification to the LEA occurred and 1,044 children who were potentially eligible for Part B services. Part C found that 27 children had not been noticed, however confirmed with the local programs that those children were noticed at the local program level. Percent=

School districts where there were no children potentially eligible received notifications that stated there were no children in their district who were potentially eligible for Part B during the reporting period.

C. Transition conference, if child potentially eligible for Part B

1,017/1,017*100=100%.

Statewide: The compliance percentage for this indicator was derived from child record review data. One program was monitored during this period. Of the ten (10) children exiting Part C and potentially eligible for Part B where the transition conference occurred, ten (10) children exiting Part C were potentially eligible for Part B. Percent=10/10*100=100%. The program achieved 100% compliance in this indicator. Nevada recognizes this is a small number of records, therefore, in FFY09, Nevada is moving from cyclical monitoring process to annual self-assessment. This will result in data collection across all programs. In addition, the information for annual self-assessment will also be taken from the TRAC data collection system.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2008:

8A. Progress and Slippage

Only one program was monitored during this reporting period. The program was found to be 100% compliant. The percentage of compliance was derived from child record review and due to the size of the program, the number of records reviewed was small. Part C has moved from a cyclical monitoring process to an annual self-assessment of all programs. All programs are closely monitoring through internal quality assurance procedures that include child record review, to ensure there is ongoing compliance in this area.

Table 8.A. Findings and Correction of Noncompliance

FFY	Number of Findings of Noncompliance Related to Indicator 8A	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY2007	1	0	1	0
FFY 2008	4	Correction to be reported in FFY 2009		

In order for Nevada to verify a program has corrected noncompliance: 1) the program must provide documentation that is verified through child record review that all children of transitioning age had a transition plan with steps and services; and 2) program managers must review child data quarterly to determine whether the program continues to be in compliance with the requirement of the indicator; and 3) Part C will verify correction through child record review and the annual self-assessment.

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The one program that did not have timely correction was in the process of being dissolved. The program was in chaos and was unable to provide documentation through an annual report that supported correction. Verification for individual child correction was completed and it was found that there was subsequent correction in this area. The program is no longer an early intervention provider for the State of Nevada.

8B. Progress

Nevada determined for Indicator B, that the notification to the LEA would be done at the state level rather than at the local program level. This is not a compliance area for local programs as the Data are sent from the Part C office utilizing the Tracking Resources and Children (TRAC) database.

Table 8.B. Findings and Correction for Noncompliance

FFY	Number of Findings of Noncompliance Related to Indicator 8C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY06	1	0	1	0
FFY2007	1	1	NA	0
FFY 2008	0		NA	

In order for Nevada to verify that a program has corrected the noncompliance: 1) the program must provide documentation that is verified through the TRAC data collection system that notification has been sent to the LEA for all children potentially eligible for Part B services; and 2) Part C and program managers must review child data quarterly to determine whether the program continues to be in compliance with the requirement of the indicator.

While compiling data for the FFY06 APR in December 2007, Part C recognized twice a year was not sufficient and found late referrals were being missed in the LEA notifications. Part C developed a two step process for verifying every child transitioning that is potentially eligible for Part B will be included on the LEA notification. Exit Data are cross-walked with the LEA notification list. The notification is sent to the LEAs on a quarterly basis for all children potentially eligible for Part B. Children who are not included on the notification list because of late entry into the system are notified by the local program. Nevada's performance in this indicator improved from 79% to 100% due to the systemic changes implemented.

8C. Progress

Using the Tracking Resources and Children (TRAC) child data collection system in completing the 618 data for Table 3, Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion from the November 1, 2009 submission (2008-2009) to calculate the number of children exiting Part C and potentially eligible for Part B.

Table 8.C. Findings and Correction on Noncompliance

FFY	Number of Findings of Noncompliance Related to Indicator 8C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY2007	1	1		
FFY 2008	0		NA	

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In order for Nevada to verify a program has corrected the noncompliance: 1) the program must provide documentation that is verified through child record review that all children potentially eligible for Part B services had a transition 2) Part C will verify through the TRAC data collection system all children potentially eligible for Part B services had a transition conference; and 3) program managers must review child data quarterly to determine that the program continues to be in compliance with the requirements of this indicator.

All early intervention programs in the Southern region have developed a Memorandum of Understanding (MOU) with the local school district which mirrors the Department of Education level agreement related to roles and responsibilities between Part C and Part B for successful and timely transition. NEIS South renewed their agreement with a local southern rural school district. Direct service providers, program managers and the Director of Special Education and staff for the county met to develop specific written procedures to support the agreement and further ensure timely transitions in the rural area.

NEIS South and NEIS Northeast redistributed a rural county of the State, the Northeast program taking the northern section and the South program taking the southern section of the county. This redistribution made it possible to more efficiently provide transition services to the families of that county.

Early intervention programs in the south meet quarterly with school district staff and transition liaisons to ensure timely transition meetings. Through the collaborative effort of the early intervention programs in the south and Clark County School District (CCSD) personnel, CCSD has reached compliance with having Individualized Education Programs (IEPs) completed and held prior to the child's third birthday. This improvement has been attributed to the diligent efforts of the early intervention programs to notify CCSD of upcoming transitioning children 6 to 7 months prior to a child's third birthday. Family Specialists employed by NEIS South partnered with a school district transition teacher to provide training for families regarding the IEP process.

Early intervention programs is the Northwest have invited the Parent Training and Information Center Nevada PEP (Parents Empowering Parents) and Family Ties to attend the Developmental Groups serving children who are transitioning to offer additional support and information.

State Performance Plan Activity Update

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future APRs. Activities are eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Activities for this reporting Period

Activity 9: Regularly scheduled meetings are held between local programs and the local school district representatives to ensure timely transition and data sharing. **This activity is ongoing.**

- Early intervention programs in all regions have developed a Memorandum of Understanding (MOU) with the local school district which mirrors the Department of Education level agreement related to roles and responsibilities between Part C and Part B for successful and timely transition.
- During the regularly scheduled quarterly meeting with the local school district, early intervention programs in the south have notified the school district of upcoming transitioning children 6 to 7 months in advance of the child's third birthday. This has facilitated the district's ability to complete the IEP process before the child's third birthday.

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- In the Southern region, school district representatives are assigned to each developmental specialist for transition planning meetings.
- The Northwest region has developed a tickler system; a list of children who will be transitioning from early intervention two months before the required 90 days. Supervisors from this program also meet with the school district representatives two times per month to ensure timely transition.

Activity 14: Part C continues to implement a process to notify the LEAs on a quarterly basis of all children potentially eligible for Part B. In addition, the local early intervention programs notify the LEAs on a per child basis during the transition process from Part C to Part B, so children that are missed in the Part C statewide report are captured at the local program level with parental consent. **This activity is ongoing**

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable

Procedural Activities

Upon review, these activities are considered to be a part of the ongoing operational process for early intervention programs. They will be eliminated in the SPP and will not be reported on in future APRs.

Activity 4: The Part C office continues to provide transition training to all new employees and employees designated by supervisors, which includes training on the Transition Effective Practice Guidelines. Additional training on transition is provided as needed and/or requested by each program. Easter Seals of Southern Nevada continue to have turnover of staff, therefore, Part C provided additional transition training to all new developmental specialists as well as contracted therapists. Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 8.

Activity 7: Program managers will conduct internal audits on a monthly basis. If it is found that there is slippage in performance in planning for transition in a timely manner, program managers identify underlying reasons for the slippage and include actions to address noncompliance through corrective action plans and progress reporting. This activity was initiated when Nevada was under special conditions for transition and is an on-going procedure for general supervision. Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 8.

Activity 13: Technical assistance and training continues to be provided to all regions to assist them with the requirements of transition including the timelines and requirements for the development of the plan, and additionally the requirements for participation by the LEA in transition meetings. . Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 8.

Activities Completed

Activity 1: NEIS North has completed the corrective action plan to include steps to correct noncompliance related to timely transition planning and appropriate transition plans. **This activity was completed FFY07.**

Activity 10: Easter Seals of Southern Nevada as well as REM Nevada have developed a MOU with the local school district regarding transitioning policies and procedures. All regions have completed interagency agreements between the regional NEIS programs and local school districts that mirror the Department level agreement related to roles and responsibilities between Part C and Part B for successful and timely transition. This included collaboration with school districts regarding assessment instruments that meet their requirements. **This activity is completed FFY07.**

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Activity 12: Through collaboration between regional programs and their local school districts, some assessments completed by the local program staff are accepted by the school district to facilitate a timely transition. This activity was completed in FFY07.

Activity 15: The program monitoring process was modified for child record selection to ensure there is an adequate selection size for each indicator area in order to draw conclusions of compliance or noncompliance. The Part C office includes children of the appropriate age for transition in annual monitoring, reviewing appropriate transition planning, individualization of the plan, preparation and training of the parents, preparation of the child, the dissemination of information and the transition meeting. **This activity was completed FFY07.**

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416 (a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

States are required to use the "Indicator C 9 Worksheet" to report data for this indicator (see Attachment A).

FFY	Measurable and Rigorous Target
FFY 2008	100%

Actual Target Data for FFY 2008:

- a. 12 findings of noncompliance were made in FFY07.
- b. **8** corrections were verified to be completed as soon as possible but in no case later than one year from identification.

Percent = 9 divided by 13×100 or 67%

Four (4) additional findings identified in FFY07 were subsequently corrected. This results in 12 of the 12findings (100%) from FFY07 having been corrected either timely or subsequently.

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Table 9.A. C-9 Worksheet

Indicator/ Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncomplian ce identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	(c) # of Findings of noncompliance from (a) for which correction was subsequently verified	Date Subsequent Correction Verified
Percent of infants and toddlers with IFSPs who receive the early intervention services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	0	1	1/19/2010
on their IFSPs in a timely manner	Dispute Resolution: Complaints, Hearings	2	5	5	NA	NA
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	NA	NA	NA	NA
in the home or community-based settings	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	NA	NA	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	NA	NA	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	NA	NA	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
6. Percent of infants and toddlers birth to 3 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	NA	NA	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1	NA	NA
uay timeline	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA

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Indicator/ Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncomplian ce identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	(c) # of Findings of noncompliance from (a) for which correction was subsequently verified	Date Subsequent Correction Verified
transition planning to	ren exiting Part C who receive support the child's transition to community services by their	o preschool				
A. IFSPs with transition steps and services;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	0	1	01/20/2010
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
B. Notification to LEA, if child potentially eligible for Part B	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1	0	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
Procedural Safeguards	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1	NA	NA
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
Evaluation and Assessment	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	0	1	01/20/2010
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
IFSP Development and Implementation	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	0	1	01/28/2010
	Dispute Resolution: Complaints, Hearings	0	NA	NA	NA	NA
	e numbers down Column a		12	8	4	
Percent of noncomplia	ance corrected within one year o	of identification=		67% n (b) sum divided by) sum] times 100		

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Describe the process for selecting EIS programs for Monitoring:

In FFY07 and FFY08, programs were selected for monitoring for compliance with Part C requirements based on a two-year rotational schedule. One program underwent monitoring for the first time after becoming a service provider in February 2007. Three program's went through the monitoring process based on data from FFY07 but findings were not issued by the IDEA Part C Office until the FFY08 reporting period (October and November 2008). Data on all children are available from the Tracking Resources and Children (TRAC) database relative to Provision of Services in Natural Environments and compliance with the 45-day timeline for convening the IFSP meeting after referral. Therefore, all programs are monitored annually on these Indicators. In FFY07, there were five (5) active early intervention service provider agencies in Nevada.

Verification of Correction (either timely or subsequent)

When any child specific noncompliance occurred, Nevada ensured each individual case of noncompliance was corrected. If the noncompliance was related to a timeline, early intervention programs were directed to take the required action although late (e.g. evaluation/assessment, service provision, transition conference). Programs that demonstrated extensive noncompliance were required to develop written corrective action plans which included strategies, persons responsible for ensuring implementation, and timelines. In addition, to verify correction of any noncompliance that occurred, the IDEA Part C Office reviewed updated data to ensure the program was correctly implementing the specific regulatory requirement. The IDEA Part C Office grouped individual instances of noncompliance related to the same requirement into one finding for which the program must demonstrate compliance. See indicators 1, 7, 8a, 8b, and 8c for more details on the data source/process used to verify correction for each of these indicators.

In FFY07, Nevada issued a total of twelve (12) findings of noncompliance. Of the twelve, eight (8) were verified to have been corrected within one year from the date of identification (by FFY08). This represents improvement from 42% to 67% in the percent of findings corrected in a timely manner from FFY07 to FFY08. Three (3) findings of noncompliance were verified to have been subsequently resolved. This brought the total correction, including timely and subsequent to 91.67% compared to the 74% reported for FFY07.

The four FFY07 findings of noncompliance not corrected in a timely manner were attributable to one early intervention (EI) program. The program provided notice to the State they were withdrawing as a service provider in July 2009. They worked with the State to transition children to a new EIS program. Final transitioning of the children was completed in October 2009. Nevada has verified subsequent correction of three (3) of the areas of noncompliance by ensuring all children who were still within the jurisdiction of Part C received the evaluations, assessments appropriately developed IFSPs and services due to them, although late. Because the program did not continue to provide services, Nevada was unable to collect updated data to verify the program was correctly implementing requirements.

Response to OSEP FFY 2007 SPP/APR Response Table issued June 2009: Reporting on Correction of Previous Noncompliance

In the FFY07 SPP/APR Response Table issued June 2009, OSEP required Nevada report in its FFY08 APR on the correction of its one remaining FFY05 finding (under Indicator 1) and four FFY06 remaining findings (one under Indicator 1, one under Indicator 8B and two in other areas), in accordance with Part C IDEA section 635(a)(10)(A) and 34 CFR §303.501(b) and OSEP Memo 09-02.

Correction of Remaining Findings of Noncompliance (if applicable)

Timely Initiation of IFSP Services:

One (1) finding of noncompliance identified in FFY06 and not corrected in FFY07 was specific to Indicator 1. The IDEA Part C Office continued to monitor underlying issues through interviews with early intervention personnel, communication with administrators for early intervention at the State level, and tracking data through the Tracking Data and Resources Data System including number of referrals, number of new IFSPs and assignment of individual children to service providers.

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The Part C Office has worked with all early intervention programs to establish a process for verifying correction for all individual children who have had delayed initiation of IFSP services. Upon assignment to a service provider, an IFSP review is held for all children who have waited for a service to offer compensatory services or other appropriate remedy agreed upon by the program and the family. However, there has not been subsequent correction of the systemic noncompliance by this program at this time as the process of recruiting and establishing new service providers continues. It was also determined that the lack of correction being achieved in this indicator warranted more intense focus including more extensive and more frequent data review and analysis. Therefore, the frequency of program self-assessment has been increased to annually as well as monthly monitoring of individual child assignments to services through the TRAC data system.

The Department of Health and Human Services prepared a budget requesting additional funding for the early intervention system and presented it to the Governor for the then upcoming biennium (SFY2010-2011). The Governor included the request for increased funding in the budget presented to the Legislature and additional funds were allocated for early intervention services. These funds became available on July 1, 2009. Since that time, some progress has been made in the number of children for whom services are delayed as well as some reduction in the length of time of the delay. Again, as stated in Indicator 1, it is apparent the state is facing additional budget cuts in SFY2010 and there is concern regarding the impact this may have on the new funding allocated for early intervention services.

Indicator 8.B.

In the FFY07 APR, Nevada reported the finding for this Indicator was not corrected in a timely manner. The IDEA Part C Office established a centralized process utilizing data from the TRAC data system for notification to the Local Education Agency (LEA) regarding children who were receiving Part C services and potentially eligible for Special Education services. For the FFY06 reporting period, a report of children with third birthdays approaching was submitted to the LEAs every six months. It was found that by reporting on this frequency some children did not get reported due to various entry and exit points throughout the year. In the last quarter of FFY07, the IDEA Part C Office increased the frequency of submitting reports to the LEA from bi-annually to quarterly. While this resulted in improvement, the strategy was implemented too late in the fiscal year to ensure full correction in the FFY07 APR. In FFY08, the IDEA Part C Office continued with the process of quarterly reporting. In addition, there was verification through the TRAC data system that local early intervention programs are notifying the LEA regarding any children who may have been missed in the quarterly data reports. See Indicator 8.B. for specific data. Therefore, **Nevada has achieved full correction of the identified noncompliance relative to Indicator 8.B**.

Other Categories of Noncompliance Established by IDEA Part C Office Monitoring:

Procedural Safeguards:

One (1) program had a finding of noncompliance relative to Procedural Safeguards in FFY06. As reported in the FFY07 APR, the program did not demonstrate timely correction of the noncompliance (within a year from issuance of the findings). The noncompliance was based on the program's failure to provide appropriate documentation in child records regarding providing Prior Written Notice at all appropriate junctures, parental consent and demonstrating parent rights were reviewed at all decision making junctures. The IDEA Part C Office program contact person provided on-site technical assistance to program personnel regarding appropriate documentation in child records. At an ensuing verification visit, **the program was found to have subsequently corrected** in this area in June 2009.

Timely and Accurate Data (Local Programs):

Two (2) programs had a finding of noncompliance relative to Data Accuracy in FFY06. As reported in the FFY07 APR, the programs did not demonstrate timely correction of the noncompliance (within a year from issuance of the findings). The noncompliance was based on ensuring that information in child records was consistent with information entered in the TRAC data system. Also, in the case of one program, correction was impacted by extensive turnover in program personnel requiring new personnel be trained in appropriate procedures. Clarification regarding the requirements for data entry was provided by the IDEA Part C Office. Ensuing **verification showed subsequent correction by both programs** in this area; one in October 2008 and the other in March 2009.

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Note: As part of the process of preparing the FFY08 APR, it has been determined this review of local program Data are actually part of the process of data clean-up and verification. It will continue to be a part of the General Supervision Process but will not be reported as a separate State Indicator in future APRs.

If the State reported <100% for this indicator in its FFY 2006 APR and did not report that the remaining FFY 2006 findings were subsequently corrected, provide the information below:

Table 9. B. Findings From FFY06 Not Subsequently Corrected

Number of remaining FFY 2006 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	5
Number of remaining FFY 2006 findings the State has verified as corrected	4
Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	1

The one (1) finding of noncompliance identified in FFY06 and not corrected in FFY07 is specific to Indicator 1. The IDEA Part C Office continued to track underlying issues through data reviews and communications with program and administrative personnel. The specific underlying cause of the noncompliance continued to be linked to the decline in economic status being experienced by the State of Nevada. Additional funds were allocated for early intervention services during the 2009 Legislative session. All new funding was designated for recruiting community based service providers. Some progress has been made in recruiting new service providers. Additional information on specific actions taken relative to the program referenced in Table 9.B. to ensure correction is outlined in Indicator 1.

It is noted the State is likely facing additional budget cuts in 2010 and there is concern regarding the potential cuts to the funds allocated for early intervention services. Additional information on specific actions taken relative to individual programs referenced in tables 9.B. and 9.C to ensure correction for each period noted above is outlined in Indicator 1.

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable) Provide information regarding correction using the same format provided above.

Table 9. C. - Findings From FFY05 Not Subsequently Corrected

	Number of remaining FFY 2005 findings noted in OSEP's June 1, 2009 FFY07 APR response table for this indicator	1
2.	Number of remaining FFY 2005 findings the State has verified as corrected	0
3.	Number of remaining FFY 2005 findings the State has NOT verified as corrected [(1) minus (2)]	1

The one (1) finding of noncompliance identified in FFY05 and continuing to be uncorrected as of FFY08 is, again, specific to Indicator 1. The IDEA Part C Office continues to monitor the program's status. The frequency of tracking was increased from quarterly to monthly beginning July 1, 2009. The specific underlying cause of the noncompliance continues to be directly linked to State budget issues as this program is a State operated program staffed primarily by State employees. Again, as stated above, additional funds were allocated for early intervention services during the 2009 Legislative session; however, all new funding was designated for recruiting community based service providers. No new funds were allocated for existing state-operated programs. One new service provider agency has been recruited in the region covered by this program and began operations in September 2009. As of the date of this report, the new community provider has enrolled approximately 100 children. Additional information on

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specific actions taken relative to the program referenced in Table 9.C to ensure correction is outlined in Indicator 1.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY08:

The status of correction of noncompliance identified in FFY06 was reported in the FFY07 APR as follows:

- 19 findings of Noncompliance were identified in the FFY06
- 8 of the findings, or 42%, were corrected within 1 year from the date of identification (by FFY07).
- 6 additional findings were subsequently corrected bringing the percent of correction of indicators up to 74%.

For FFY08, the state was able to verify that 8of the 12 findings of noncompliance identified in FFY07 were corrected in a timely manner – an improvement from 42% to 67%. In addition, it was verified that four (4) additional findings were subsequently corrected for a total correction of findings of 100%. This is an improvement from the 74% total correction reported in the FFY07 APR.

Review of SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Critical Activities During This Reporting Period:

Activity 16: The general supervision system, including program monitoring, will be evaluated on an annual basis to determine what aspects are most effective and where changes may be appropriate. Input will be provided by system stakeholders *This activity is ongoing.*

- This is an activity that is required for the general supervision system and is, therefore an on-going operational procedure. Specifics of the operational procedures will be outlined in procedural documents and updated as appropriate. The IDEA Part C Office, through a stakeholder process and support from the National Early Childhood Technical Assistance Center (NECTAC) and the Western Regional Technical Assistance Center (WRRC), has significantly revised the Part C General Supervision System during this reporting period. Revisions in process and procedures are as follows:
- All new early intervention programs will continue to have an on-site technical assistance review by the IDEA Part C Office within the first six (6) months of operation;
- A sub-grant has been established between the State Health Division, who has designated responsibility for administrative oversight of the operation of all early intervention programs, and the Aging and Disability Services Division with specific language requiring all early intervention programs to comply with IDEA Part C requirements. Concerns related to the performance of any individual program will be issued to both the individual program and the State Health Division by the Part C Office for collaboration in determining appropriate action to be taken.
- The schedule of monitoring has been revised to require every early intervention program to conduct self-assessment on an annual basis.
- All early intervention programs are required to demonstrate the establishment of an internal
 quality assurance team that reviews program data, at a minimum, on a quarterly basis. More
 frequent reviews are recommended, or may be required, for areas identified as problematic
 relative to compliance with IDEA. Part C.
- The IDEA Part C Office will participate as a member of the program's self-assessment review team.

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- Documentation for the basis of all findings, including a roster of individual child records requiring correction, will be maintained by the program, as well as in the IDEA Part C Office. The Part C Office will track this information as part of the process of verification of correction of the noncompliance.
- The IDEA Part C Office will conduct focused monitoring as deemed appropriate, based on individual program performance in areas included in the annual report card.

Activity 14: Develop written monitoring guidelines and procedures for Part C monitoring outlining procedures for implementation, definitions of relevant terms, compliance requirements, and timeline for correction. Procedures will include the provision that any program that is determined, through state general supervision procedures, to be performing at 95% or above in a specific compliance category will not be required to generate a written Corrective Action Plan (CAP) for that area but must continue to work toward 100% compliance or compliance with the State established target, as appropriate. Program performance found to be below 95% will be a finding of noncompliance and will require a written plan to correct the noncompliance as soon as possible, but in no case, later than one year from identification. Programs will be required to submit interim progress reports as determined by the Part C Office. Distribute guidelines and procedures to all early intervention programs. *This activity is ongoing.*

 This is an activity that is required for the general supervision system and is, therefore an on-going operational procedure. Specifics of the operational procedures will be outlined in procedural documents and updated as appropriate.

Revisions, <u>with Justification</u>, to Improvement Activities / Timelines / Resources for FFY 2008 [if applicable]

Procedural Activities:

Activity 1: Nevada's general supervision system monitoring component will include a two-year cycle of Part C supported Comprehensive Self-Assessment and Focused Self-Assessment by local early intervention programs. The approach will be streamlined and continuous and will redirect emphasis and resources to technical support to ensure timely correction of noncompliance. *This activity will not be reported on in future APRs* unless there is an aspect of the process that is modified to specifically address this indicator.

Activity 2: All NEIS regions that have any unresolved noncompliance beyond one year from cyclical program monitoring, complaints, etc., will receive targeted technical assistance to ensure that noncompliance is corrected within an agreed upon time period. If necessary additional enforcement actions will be implemented,

This is an activity that is required for the general supervision system and is, therefore an on-going operational procedure. Specifics of the operational procedures will be outlined in procedural documents and updated as appropriate. This activity will not be reported on in future APRs unless there is an aspect of the process that is modified to specifically address this indicator.

Activity 5: Program managers will monitor corrective action plans to ensure correction within the one year time period. Program managers will collaborate with the quality assurance Part C staff to jointly develop and implement technical assistance and training plans.

This is an activity that is required for the general supervision system and is, therefore an on-going
operational procedure. Specifics of the operational procedures will be outlined in procedural
documents and updated as appropriate. This activity will not be reported on in future APRs
unless there is an aspect of the process that is modified to specifically address this
indicator.

Activity 6: Information gathered through periodic quality assurance reviews are analyzed by Part C for patterns and systemic issues, which will be addressed through change in policies, procedures and quidance, training, technical assistance and enforcement actions as appropriate.

 This is an activity required for the general supervision system and is, therefore an on-going operational procedure. Specifics of the operational procedures will be outlined in procedural

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documents and updated, as appropriate. This activity will not be reported on in future APRs unless there is an aspect of the process that is modified to specifically address this indicator.

Activity 8: Final complaint investigation reports will be shared with all staff through monthly team meetings, to ensure staff understand compliance issues and can learn through past mistakes.

This is an activity required for the general supervision system and is, therefore an on-going
operational procedure. Specifics of the operational procedures will be outlined in procedural
documents and updated as appropriate. This activity will not be reported on in future APRs
unless there is an aspect of the process that is modified to specifically address this
indicator.

Activity 13: Program compliance with IDEA provisions will be determined for ten (10) specific categories including 1) Service Coordination, 2) Procedural Safeguards, 3) Evaluation/Assessment, 4) IFSP Meeting within 45-days from Referral, 5) IFSP Development and Review, 6) Timely Delivery of Services on the IFSP, 7) Provision of Services in Natural Environments, 8) Transition Planning, 9) Transition Conference, and 10) Timely and Accurate Data. Performance in each category will be determined based on performance on relevant items achieved within the category. 2007-2010 Part C Office Personnel, Early Intervention Program Monitoring Team.

This is an activity that is required for the general supervision system and is, therefore an on-going
operational procedure. Specifics of the operational procedures will be outlined in procedural
documents and updated as appropriate. This activity will not be reported on in future APRs
unless there is an aspect of the process that is modified to specifically address this
indicator.

Activity1: All information gathered through the general supervision process will be compiled and reviewed following each program's annual submission (either a Comprehensive Self-Assessment Report or a Yearly Progress Report) and a determination of overall performance will be issued by the Part C Office. The determination will indicate that the programs either meet requirements, need assistance, need intervention, or need substantial intervention.

This is an activity required for the general supervision system and is, therefore an on-going
operational procedure. Specifics of the operational procedures will be outlined in procedural
documents and updated as appropriate. This activity will not be reported on in future APRs
unless there is an aspect of the process that is modified to specifically address this
indicator.

Activities Completed or Eliminated

Completed:

Activity 3: Designate Part C staff as a quality assurance specialist to do periodic quality assurance reviews that includes compliance. These reviews will happen between monitoring cycles and will identify technical assistance priorities which will prioritize use of training dollars across all regions. 2005-2010, Part C staff. **This Activity is Completed**

Activity 4: Early Intervention programs will assign a lead person to coordinate all follow-up to the complaint report including all corrective action activities, documentation, and reporting on progress within the timeframes specified. **This Activity is Completed**

Activity 7: Develop a mentoring program for direct service personnel, which would pair them with an experienced staff person to support their growth and learning, 2006-2010, Bureau Chief and Regional Program Managers. **This Activity is Completed**

Activity 10: Each region will develop a process for sharing and reviewing family survey results with staff to take action on family feedback that requires a system correction, to understand family's perception of the service delivery system and to address areas for system improvement. **This Activity is Completed**

Part C State Annual Performance Report for (F	FY08)
(OMB NO: 1820-0578 / Expiration Date: 11/30/	(2012)

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Activity 12: Increase the staff to supervisor ratio in order to provide more support to direct service personnel, which would improve the quality of services through a request for increased funds from the next Legislative session, 2007, Bureau Chief. **This Activity is Completed**

Eliminated:

Activity 9: Implement a peer review and feedback process to assist with how to put requirements into practice, ensuring understanding of policies and procedures, support for implementing family centered practices and for staff support, 2006-2010, Regional Supervisors.

 It has been determined that this activity is not sufficiently targeted to ensure measurable improvement for this indicator. <u>This Activity is Eliminated</u>

Activity 11: Each region will develop Parent Orientation Training to support new families entering early intervention, 2006-2010, Regional Program Supervisors.

 It has been determined that this activity is not sufficiently targeted to ensure measurable improvement for this indicator. This Activity is Eliminated

New Activity in FFY08

Activity 17: In collaboration with the Nevada Health Division, Part C participates in a readiness review of all new providers through a checklist created by Part C to ensure programs ability to comply with IDEA Part C regulations. Program Manager/Supervisors and Part C staff 2008-2010.

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Overview of the Annual Performance Report Development: See Page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c))] divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2008	100% of all complaints were resolved within 60 day timeline

Actual Target Data for FFY 2008:

Statewide There were 18 complaints filed during the reporting period. Eight (8) complaints were withdrawn by the family. Of the remaining 10 complaints, nine (9) (90%) reports were issued within 60 days. The remaining one (1) (10%) report was the response to the Administrative complaint that was filed on behalf of all early intervention children in the state. The scope and nature of this report was very labor intensive and therefore an extension was requested to ensure a thorough investigation of the issues was conducted.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Part C has developed a process for assigning and tracking every complaint that comes into the system. Part C staff are designated as lead for the complaint and a tracking log is kept on each complaint. This log includes the date the complaint was received, who was assigned, the issues to be investigated and the date the report is due. The log also tracks what child and system findings there were, and what corrective action the program must implement as a result to ensure correction of noncompliance as soon as possible, but no later than one year from identification. The log also tracks when the correction has been completed and the date of closure on the complaint. This log is shared with the ICC at quarterly meetings

Each complaint finding report is reviewed by the Part C Coordinator and when final is also reviewed by the State Attorney General's office prior to being released to the family and the program.

The exception this year to meeting the 60 day timeline was in relation to an administrative complaint filed by the Nevada Disability Advocacy and Law Center. This complaint was very large in scope as it alleged system violations for all children enrolled in early intervention. The complaint investigation report had to be approved at various levels before release including the Attorney General's office and The Department of Health and Human Services. As a result, there was an extension requested beyond the 60 day timeline. This is an exception to the system in place for complaint investigation,

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and all other complaints filed within this reporting period met the timeline for investigation and reporting of findings.

State Performance Plan Activity Update

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future APRs. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Critical Activities During for This Reporting Period

Activity 1: Part C maintains an existing **electronic matrix to track complaints** from the date received through the 60 day timeline for completion. The timeline for each complaint is monitored by the Part C Coordinator to ensure Part C staff assigned to investigate the complaint complete the process within the specified timeframe. **This activity is ongoing**.

Activity 2: Part C has developed a **formal process for extending the timeline** for completing the complaint investigation based on exceptional circumstances, in the FFY 2008 this process was utilized for the administrative complaint that was filed. **This activity is ongoing**.

Activity 4: Part C maintains the complaint tracking system to ensure that **program corrections** are completed as soon as possible, but not later than one year from identification. Part C staff also provide follow-up to verify that system corrections have been completed. Each region has designated one person as the lead within their agency to submit corrective action reports and to follow the complaint to completion. **This activity is ongoing**.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable]

Upon review, this activity is considered to be part of the ongoing operational process for early intervention programs. It will be eliminated in the SPP and will not be reported on in future APRs.

Activity 3: New employee orientation provides **training** to all new direct service personnel on the procedural safeguards including the complaint system, and how each staff members work directly impacts the program and the importance of IDEA compliance. In addition, final complaint investigation reports are shared with all staff through monthly team meetings, to ensure that staff understand compliance issues. Because this is an on-going procedure for general supervision, **this activity is being eliminated from the SPP for Indicator 10.**

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Overview of the Annual Performance Report Development:

See Page 1

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b))] divided by 3.2 times 100.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

There were three (3) due process hearing requests filed in FFY08. Two (2) of the hearing requests were resolved through resolution sessions. The one (1) remaining hearing was fully adjudicated. Baseline will be established when there are 10 or more due process hearing requests.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2008:

Nevada Part C follows the Part B Due Process Hearing regulations. Two of the due process hearing requests filed were resolved by the program and the family through the resolution session. The third due process was a re-filing of a previous hearing request filed in June 2009 that had been withdrawn. Mediation for that due process occurred during this reporting period without resolution; however, the family subsequently withdrew the hearing request. The family re-filed a hearing request in this reporting period and the issue was unchanged. Therefore, both parties opted to move to the hearing. There were no compliance findings issued from this hearing.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable]

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Overview of the Annual Performance Report Development: See Page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2008	Target to be determined once baseline data are available.

Actual Target Data for FFY 2008:

There were three (3) due process hearing requests filed in FFY 2008. Two (2) of the hearing requests went to resolution session and 2 (100%) were resolved through the session. Baseline will be established when there are 10 or more due process hearing requests.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FY 2008:

Nevada Part C follows the Part B Due Process Hearing regulations. Two of the due process hearing requests filed were resolved by the program and the family through the resolution session. Data elements have been added to Part C's tracking system to ensure that this indicator can be fully addressed as needed

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable]

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Overview of the Annual Performance Report Development:

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Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i))] divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2008	Target will be determined when baseline is available

Actual Target Data for FFY 2008:

There was one (1) mediation request in June of FFY 2007 in conjunction with a due process request. The mediation was held in this reporting period FFY 2008. Neither party could come to agreement or resolution during the mediation session. The due process was subsequently withdrawn in August 2008. Baseline will be established when there are 10 or more mediation requests.

Discussion of Improvement Activities Completed \underline{and} Explanation of Progress or Slippage that occurred for FFY 2008:

A system for requesting mediation is in place, with a pool of trained mediators.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 [If applicable]

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Overview of the Annual Performance Report Development:

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Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the "Indicator 14 Data rubric" for reporting data for this indicator (See Attachment B.)

FFY	Measurable and Rigorous Target
2008	a. Submitted on or before due dates100%
	b. Accurate, including covering the correct year and following the correct measurement100%

Actual Target Data for FFY 2008:

- a. Part C submitted 618 data reports Table 1 and 2 by February 1, 2009 and Table 3 and Table 4 on November 1, 2009. The State Performance Plan Indicator 3 and the Annual Performance Report for Federal Fiscal Year 2008 were submitted by the due date of February 1, 2010. Utilizing the Scoring Rubric for Indicator 14, Nevada scored **100%** on this indicator.
- b. Part C has implemented numerous procedures to assure data are valid and reliable as identified in the activities below; Nevada scored **100%** on this indicator.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2008:

Data accuracy is ensured through key components of the statewide mandated forms and the Tracking Resources and Children (TRAC) child data collection system. The front-end of the TRAC application has features for identifying 'data anomalies,' including restricted drop-down lists for data fields which minimize data errors due to typographical error or submission of spurious information. Data must be entered into critical fields in the data system in order to allow data entry to progress. The application was designed to ensure duplicate record entries do not occur.

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TRAC utilizes User ID and Password to authenticate access to the database, each User ID is setup with a security level at the time of assignment. The application identifies all data changes in a record with a date/time stamp and by the last user to access the record. The security levels are as follows –

System Administration:

- Read Data
- Enter/Modify Data Statewide Caseloads
- Run Reports Statewide Caseloads
- View/Print Tickler List Statewide Caseloads
- View/Modify Security/User Maintenance
- View/Modify Lookup Table Maintenance

Supervisors and Program Managers:

- o Read Data
- Enter/Modify Data Program Caseloads
- Run Reports Program Caseloads
- View/Print Tickler Program Caseloads

Service Coordinators:

- o Read Data
- Modify Data Caseload Only
- Run Reports Caseload Only
- View/Print Tickler Caseload Only

Data Entry:

- o Read Data
- Enter/Modify Data Program Caseloads
- Run Reports Program Caseloads
- View/Print Tickler Program Caseloads

Read Only:

- o Read Data
- Run Reports Program Caseloads

State Performance Plan Activity Update

SPP Activities:

All SPP activities were reviewed for this reporting period to verify whether or not they were sufficiently targeted to address the underlying issues relevant to the specific indicator. Based on that review, activities were determined to be reasonably calculated to address improvement in the indicator or more general operational/procedural activities that are ongoing in nature. Some activities have been found to be completed as stated or are being eliminated as no longer appropriate to the Indicator. Activities that have been determined to be completed will not be reported on in future APRs. Activities eliminated will be removed from the revised SPP for 2009. Clarification is provided for the determination for each activity.

Critical Activities During for This Reporting Period:

Activity 4: The Part C Data Manager has created refreshable reports for each program utilizing Crystal Reports to encourage programs to run data reports as needed for **data driven decision making**, to allow them to **audit their data for accuracy** and for tracking and scheduling their therapy services per IFSPs. **This activity is ongoing**.

Activity 5: With the creation of refreshable data reports for each program, it has allowed the **Regional Data Managers to audit their own program data** on an as needed basis. Program Managers also utilize these reports to analyze caseload size of staff for assignment of new children referred to the program. This assists in managing the 45-day timeline requirement. Programs have requested ad hoc reports to allow them to monitor six month reviews, and transition to enable them to support staff in

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meeting their timelines. This allows the programs to make data driven decisions and to ensure data are accurate and reliable. **This activity is ongoing**.

Activity 9: Every month each Service Coordinator provides their supervisor with a list of their active cases, supervisors then do **spot checks with the Service Coordinator to ensure data are current and accurate.** The supervisor reviews the record to ensure the services listed are correct, IFSPs are current, reviews have been completed, transition planning is occurring and children are not past the age of three. **This activity is ongoing.**

Activity 10: The Part C Data Manager has provided **individual training** to program data managers and data entry staff to ensure that TRAC data are entered accurately. The Part C Data Manager has attended all-staff meetings within programs to answer questions and provide guidance on data entry and for clarification on what the data field is meant to collect. The Part C Data Manager attends the weekly management meeting with all regional program managers and provides data updates, answers questions, and also attends the quarterly Statewide Management Meeting that includes Part C staff and all program managers and supervisors. **This activity is ongoing**.

Activity 14: Regional Part C state contacts are working with designated supervisors within each early intervention program to ensure that COSF data for entry and exit are being provided on a monthly basis. Tickler reports are being run through Crystal Reports accessing the TRAC database. Programs are providing monthly follow-up reports on the status of each child on the tickler list. Part C staff, Program Supervisors and Data Manager. This activity began in FFY07. **This activity is ongoing.**

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007 [If applicable]

Activities Eliminated

Activity 1: TRAC III began modification in January 2006 to incorporate new data elements not currently being collected to assist with developing SPP and APR data. The TRAC database currently collects all of the data required for 618 data reporting. The Department of Information and Technology with the State has been working on the **TRAC database modifications**. The complication in completing the revisions is the availability of the programmer, and the availability of the Part C Data Manager to test the programming changes. Due to the workload of the Data Manager in creating reports, monitoring the data for accuracy, troubleshooting and training staff, it is still difficult to dedicate time to TRAC IV testing. **This activity is being eliminated**

• With the increase in ARRA funds in the second grant award, the State of Nevada has determined at this time to work with Nevada's Department of Information and Technology to prepare an RFP for the purchase of a new Part C data system. The TRAC system was built over 10 years ago and was not designed for the data collection elements required currently. It will be more cost effective in the long run to purchase a new data system than trying to upgrade the existing TRAC system.

Activity 6: At the beginning of each month the Northeastern Regional Data Manager provide Service Coordinators with a copy of the Child Detail Report from TRAC for each of the children on their caseload. The reports are checked for accuracy by the Service Coordinator, any changes are marked on the report and given back to the data entry staff for any data changes/updates. Once the changes have been made in TRAC, the Child Detail Report is printed again and discussed in the weekly team meetings with Supervisors to again **ensure accuracy of the data entered**. **This activity is being eliminated**.

• Service coordinators are now doing their own data updates for their caseload in TRAC and have access to each of their child's records electronically. It is no longer necessary for the data entry staff to update TRAC changes.

Activities Completed

Activity 2: The **TRAC** training manual was updated in July 2006 to assist with training new and existing staff on the TRAC data collection, each manual includes technical assistance documents created by the Part C Office and the current OSEP Part C Data Dictionary. Each staff member and their supervisors

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have access to the TRAC manual. Within each program, there are data managers who can assist staff with TRAC questions. **This activity was completed**.

Activity 11: The Southern Region which includes Southern Nevada Early Intervention Services, REM of Nevada and Easter Seals of Southern Nevada, has allowed their **Service Coordinators to enter data** into the child records on their caseload, this activity has been in place since FFY05. During FFY07, the Part C Data Manager met with each of the teams in the Northwestern Region and provided TRAC training to allow their Service Coordinators to enter data into the child records on their caseload. Prior to this change the Service Coordinators only had 'Read Rights' to the children on their caseload and would have to submit a record change on a piece of paper to the Data Entry Staff. This process change has been a great success in the Southern Region and the Northwest Nevada Early Intervention Services program. **This activity is completed.**

Activity 13: Each Effective Practice Guideline has **TRAC TIPS** to support staff in remembering key times when data changes are required in the TRAC database. These reminders are to ensure all data are entered at appropriate junctures and to ensure staff understands what these data requirements are related to their various practices e.g. IFSP, eligibility, services, transition, etc. **This activity was completed**.

Procedural Activities

Activity 3: **Quarterly audits/data verifications** are completed for each program by the Part C Data manager. These data audits/verifications consist of the following:

- Audit on the 45-day timeline which includes how many children were over the 45-day timeline, and if there were any appropriate exceptions. Each program is provided with a printout and given the opportunity to update the data to ensure the data are current and correct. Each program was provided with a breakdown of the number of children who met the 45-day timeline and the number of children who exceed the timeline and the number of days over/under the timeline.
- A report is provided to each program quarterly on every child who is in the referral process and how many days from the point of referral to the current date of the report that they have been in this status. The Part C Data Manager has also developed a refreshable report so that programs can review these data more often than quarterly. This enables Part C and the program managers to monitor the children who are approaching the 45-day timeline and also to give guidance on follow-up that needs to take place regarding closing records for example where the program has lost contact with the family.
- Audit current data for children with an active IFSP over the age of 3. A list is provided to each program of the children that have not been exited from the database who are over the age of 3 and these data are corrected for all final reports.
- Audit to ensure all active children have current IFSPs; this includes auditing for children whose IFSP has expired, the annual IFSP date is correct and correct in the database. Programs are provided with a list to correct to ensure accuracy.
- Review exiting data to ensure children are being exited properly and the appropriate exit codes are being utilized. Particular attention is paid to the Program Completion section of the Table 3 exit codes.
- Nevada has a high transient rate within the early intervention system. Families move within and outside of the state frequently. Families are unable to be contacted due to disconnected phones, returned mail with no forwarding address, providers showing up to the home and the house is empty. As a result cases are closed, and then the family reappears at a later date. Each of these re-open requests is reviewed by the Part C Data Manager to ensure the child is entered back

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into service in an appropriate status, for FFY07 the Part C Data Manager reviewed 571 record reopen requests.

- > Audit the data to ensure all active children have all required data fields completed e.g. sex, race/ethnicity.
- Audit data to ensure the service settings are complete for each child record and if a service setting is marked as "other" the program is required to clarify what the "other" setting is, by entering a new Note in the TRAC child record explaining the setting.
- Ensure every active child with an IFSP has services listed in the TRAC database.
- A fifth audit is completed during the year related to the December 1 Count. The same audits as described above are completed to ensure all data for children in the December 1 count are accurate and verified, to ensure Nevada is counting only the children with current IFSPs under the age of three.

All of the quarterly audits ensure Nevada can provide the required 618 Data reports and data for the SPP and the APR in a timely manner to comply with the timelines provided. **Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 14**.

Activity 7: The Part C Data Manager **reviews all the quarterly TRAC audits** to ensure the local programs have made the corrections to these data as requested. This is done to verify the accuracy of the TRAC data prior to completion of any data reports. **Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 14.**

Activity 8: During program monitoring, a Child Detail Report from TRAC is printed for every child record that is reviewed. These **Child Detail Reports are compared with the child record/chart** to ensure the data fields are current and accurate. Any discrepancies in the data are required to be corrected as part of the programs corrective action plan. **Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 14.**

Activity 12: **Program Report Cards** were developed in March 2007 and are updated annually on performance of priority indicators from the SPP and posted to the Bureau of Early Intervention Services website. **Because this is an on-going procedure for general supervision, these activities are being eliminated from the SPP for Indicator 14.**

New activity added in FFY08

Activity 15 Part C in partnership with the Aging and Disability Services Information Technology staff will develop a business case with a Technology Investment Request (TIR) to develop a plan and statement of need for a new data system. TIRs are required for Executive Branch agencies as part of their biennial budget process as well as for interim funding of information technology projects. Once the TIR is approved a Request For Proposal (RFP) will be issued to begin development of a data system that meets all of the requirements for federal reporting under Part C of the IDEA, and also includes reporting elements critical for state reporting and budget development. Part C Coordinator, Part C Data Manager, ADSD IT Personnel, and Regional Program Managers. **This activity will begin in FFY09**.